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MEDICAL SOCIETY OF DELAWARE

Proceedings: 144th Annual Session

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TUESDAY MORNING SESSION

The One Hundred and Forty-fourth Annual Session of the Medical Society of Delaware convened at ten o'clock at the Delaware Academy of Medicine, Wilmington, Dr. William H. Speer, President of the Society, presiding.

PRESIDENT SPEER: Gentlemen, we will call the meeting to order, and I will ask the Reverend Charles W. Clash for the invocation.

REV. CHARLES W. CLASH: Oh, merciful God, whose Blessed Son went about doing good, uphold with Thy strength and grace those who do service to the sick and the afflicted. Grant to physicians and surgeons wisdom and skill, sympathy and patience, and we beseech Thee to protect them in all dangers, anxieties and labors, through Jesus Christ our Lord, Amen!

PRESIDENT SPEER: Gentlemen, in the absence of Governor Buck, he has sent a very able representative in the person of the Honorable Senator George McIntyre. I want to introduce at this time the Honorable Senator who will speak a few words of welcome to this Society.

HON. GEORGE MCINTYRE: Mr. President and members of the Medical Society of Delaware, on behalf of the Governor of Delaware I bring to you his greetings, and his sincere and earnest wish that your assembly together may be of great interest to you, and also that you may have increased knowledge in a profession that means not only so much to each one of you, but so much to the thousands of people who depend upon your skill and knowledge.

Instead of thinking of you gentlemen as scientists, trained in the wonderful science of medicine, it seems to me I would rather think of you this morning as men who have dedicated each one his life and services to distressed humanity, and who give, in season and out of season, of your best ability for the people.

I think if you construe a patriot, and especially the hero patriot, you usually think of him as being upon the field of bloody battle, amidst the pomp and circumstance of glorious war, but I think that peace has its heroes as well as war, and I think that every doctor, every physician, who goes in and out in the community in which he lives and spends and is spent for suffering humanity, bears on himself the impress of the hero.

I think there is no episode, no epic, that is more thrilling or more heroic than that association of Reed and Carroll and Lazear and Ordman in their endeavor to find out exactly what caused yellow fever, in their investigation of the stegomyia, and the way that Carroll allowed an infected mosquito to bite him giving him, of course, a terrible case of yellow fever and a bad heart from which he never recovered. That to me is a splendid example of the true hero, and that is the heritage that you have.

But your heritage is so much older it is a heritage of 2500 years of splendid thought, high achievement and noble endeavor. Aesculapius started and set it firmly upon an ethical basis from which it has always reared its head with pride and honor. And then you have Hippocrates, of course, and when I think of all the crafts and all the professions in which men have banded themselves together in a learned profession, there is nothing

—except possibly the mandate that went forth years ago to those priests after the order of Melchizedek—that is so splendid and so fine and that gives one such an idea of the real splendid feeling that man could have for his fellowman as this that I shall read to you, that you know so much better than I: "Whatsoever house I enter there will I go for the benefit of the sick, refraining from all wrongdoing or corruption."

There, about 2500 years ago, was laid the foundation of your ethics. Your philosophy has been built upon that, and today I think there is no profession that deserves more honor, none, I am sure, in which the people at large have or should have such grateful consideration as for the profession of medicine.

And so again I bring you from the Governor his heartiest greetings and his best wishes that you may grow in grace, that you may grow in knowledge, and that you may always have that high ethical concept, children of a great heritage that you are, that will give to the people and find in yourself that deep satisfaction of work well done.

PRESIDENT SPEER: Gentlemen, in thinking over what I would use as my topic for this presidential address, I decided to try and depict some of the things that we are confronted with, and try and visualize certain things that we will have to do in the next twenty-five years in order to keep the profession on the plane that it now is on.

... President Speer then presented his address entitled "The Future of the Medical Profession in the Next Twenty-five Years," which was printed in The Journal last month.

PRESIDENT SPEER: Gentlemen, we will now listen to the report of the House of Delegates.

SECRETARY LAMOTTE: It is impossible, of course, to give you a full report of what went on last night, but I think I can give you the more important things. In approving Dr. Wagner's report as delegate to the American Medical Association, it was with the understanding that the Society approve the Minority Report of the Committee on Cost of Medical Care. The Society approved a proposed Uniform Act concerning the control of narcotic drugs. Section 3 of Article V of the By-laws was changed to read: "The President shall be elected by ballot at the general meeting without the intervention of a Nominating Committee, as the last order of business before adjournment of the morning session of the closing day of the session." Dover was selected for the next meeting place in 1934, on the second Tuesday of October.

... Dr. LaMotte then read the nominations for the coming year. (See the Transactions of the House of Delegates, in this issue.)

... Motion regularly made and seconded that the secretary's report of the House of Delegates, be accepted and filed. Carried unanimously ...

DR. E. R. MAYERBERG: Mr. Chairman, I think it fitting at this time, with your permission, to introduce a resolution thanking two men who have given years of service to this organization, years of fine service, a great deal of time and labor, and who have been devoted to furthering the progress of this organization. Therefore, Mr. Chairman, I move that this organization give a rising vote of thanks to Dr. W. O. LaMotte, and to Dr. S. C. Rumford, for their splendid service to us in the past years.

... Motion seconded, and carried by a unanimous, rising vote ...

SECRETARY LAMOTTE: Mr. President, may I just remind the members that there is a scientific exhibit upstairs, and I hope everybody will go up and look it over and see what has been done.

DR. G. W. K. FORREST: Will you explain what this means in the program: "Cancer Exhibit by the Delaware Committee for the Control of Cancer, New York City, N. Y." Is that a typographical error, or what does it mean?

DR. M. A. TARUMIANZ: May I answer that, Mr. President? That is from our headquarters, our branch of the Society.

DR. MAYERBERG: I have another thing in mind. I just introduced a resolution of commendation. With the Chair's permission I would like to introduce a resolution of condemnation. I will tell you why I want to do that. At a meeting of the House of Delegates in Dover this spring a certain Medical Practice Act was endorsed by the House of Delegates, and at that time I introduced a resolution which was adopted without a dissenting vote, stating that any man who opposed, either openly or in any other manner, the progress of that bill should be condemned by this Society, and in fairness to myself and in order to be consistent and to indict certain men who dare to set themselves up as being higher than this organization, or higher than the governing body of this organization, I wish to introduce the following resolution. It really doesn't need to be introduced because there is in the minutes of that last meeting of the House of Delegates one that has been accepted and one which should take the place of this.

The resolution is as follows: "That the members who violated a resolution passed at a meeting of the House of Delegates by appearing before a Legislative Committee and opposing the passage of the Medical Practice Act, be censured and reprimanded, and that they be deprived from holding any office in this organization, and that they be prevented from being recommended for office by this organization for a period of three years."

Mr. Chairman, if we don't adopt something of this sort, we might as well adjourn as a medical society, as far as promoting the progress of medicine in this state goes, and then reconvene as a sewing circle, and spend our time playing tiddledywinks. I am sincere in asking that this resolution be considered.

DR. FORREST: Does the chair entertain that resolution? If any resolution should be presented to the House of Delegates rather than this open session, then the resolution is entirely out of order. I want the chairman to determine whether the resolution should be presented to the Society this morning. Any resolution, as I understand it, should be presented to the House of Delegates.

PRESIDENT SPEER: I was trying to recall the wording of Dr. Mayerberg's motion—whether he put it as a motion that this resolution be adopted. If he put it as a motion I will have to accept it. If he is asking that the resolution be adopted I will not accept it, because it belongs in the House of Delegates as a plain resolution with no changing of the By-Laws. If it is in the form of a motion I will entertain it.

DR. MAYERBERG: It is in the form of a motion for discussion.

DR. LEWIS BOOKER: When that resolution was adopted at a meeting of the House of Delegates in Dover, was a quorum present?

PRESIDENT SPEER: Yes, sir. I will read the resolution referred to, gentlemen. This was on the 15th of March, the meeting held in Dover at the Mapledale Country Club.

DR. FORREST: I rise to a point of order. Nobody seconded the motion.

DR. P. W. TOMLINSON: I second the motion.

PRESIDENT SPEER: "Resolved, that inasmuch as this bill has been passed by the House of Delegates of the Medical Society of Delaware, every single member of the organization is thereby bound to support this bill." That was the motion referred to, in Dover. It is open for discussion.

DR. FORREST: I have lived more than half a century, and I think I have enough intelligence to think for myself. I think I should be an individual, although I am one of the collective units of this Society. I took no action whatever in trying to defeat this bill; I saw nobody; I had no activity either for or against the bill, the Medical Practice Act. Personally, I thought it was a rotten bill, but I will say this, that the House of Delegates can never tell me how to think, and I for one hope if this resolution passes, it will add my name to that list and consider me one of those that will have attempted to defeat that bill if the House of Delegates takes action to compel me to think as they think, and not allow me to think as I think as an individual.

SECRETARY LAMOTTE: I agree thoroughly with Dr. Forrest. As an officer of this Society I would not oppose something that the House of Delegates acted upon, but if I hadn't been, and was opposed to this bill thinking it was a bad thing for our Society and our profession here in the state, and particularly since it was disapproved of by the legal department of the American Medical Association, I would have felt differently about it. And by the way, I have been meeting with the American Medical Association off and on for seventeen years. At our last meeting of the Board of Secretaries of the State Societies, 48 states were represented, and I have never seen anybody from any part of the United States who did not have the highest regard for Dr. Woodward, and his staff also, as a man of integrity, a high-principled gentleman with a great deal of ability in his specialties. He is a physician; he is a lawyer; he was professor of Medical Jurisprudence in Georgetown before he became head of that department of the American Medical Association.

Now, as I understand it, there was no definite expression obtained as to the desire of the profession. This was a special meeting of the House of Delegates. It didn't have a great deal of notice. I don't know how much that particular meeting had, but a great many doctors couldn't go. I don't know whether there were more than the required quorum of ten or not. There may have been eleven out of twenty—some that were entitled to vote, and you surely cannot use an occasion like that because it is open for too many irregularities. For instance, if we should have a despot, an unscrupulous president, he could easily say to a certain number: you go down there next week on a certain date—and they could put over anything. The whole principle is wrong, and I consider it an outrageous circumstance to try and club people into action. We have, as Dr. Forrest says, minds of our own, and we would be very poor citizens, if we felt that something was bad for us all here, not to assert ourselves.

I don't know about these charges against these men who took any active part against this bill, but in our By-Laws the Council shall be the Board of Censors of the Society; it shall consider all questions involving the right and standing of members, whether in relation to other members in component societies or to this Society, and I claim that a resolution like that involves the rights of our members, preventing them from being elected to office, and all questions such as the nature of this brought before the House of Delegates or the general meeting shall be referred to the Council without discussion. I would like to have your decision on that.

DR. TARUMIANZ: Mr. President and members: for the last three or four years we have been fighting the principle of socialization, federalization, and nationalization of medicine. We have stood for individualistic medicine. We have stood for the rights of every individual member of the Society, who is a gentleman in every respect. It isn't fair that one of our members should bring up the name of one or two individuals, which eventually will be for some more or less personal interest. I beg this Society to throw out politics from our midst. We should get together and work for our scientific purposes, rather than for politics. We have done enough damage to our own friendships. I don't

see any reason why we should become dictators, become Hitlerites, or become Mussolinis. We are purely members of a scientific organization, and we should stand by that principle. I beg of you not to consider such a resolution as that. I think it is a disgrace to this Society.

DR. P. W. TOMLINSON: I agree with what Dr. Tarumianz says about doing away with politics. He says it is time, and I am only sorry it wasn't thought of some years ago.

PRESIDENT SPEER: Are there any other remarks? You have heard the motion and you have heard the discussion. Are you ready for the question?

SECRETARY LA MOTTE: May I rise to a point of order about that By-Law there? Is this in order, involving the standing of our members?

DR. TARUMIANZ: I request that Dr. Mayerberg withdraw that motion for the sake of the unity of our Society—not to have this resolution presented and not to have it in our records.

DR. MAYERBERG: I can't withdraw that resolution for the simple reason that a great principle is involved in that resolution. The one great principle is that when the governing body of any organization adopts any single program, then every single member in that organization must cease to be an individual as far as that program is concerned and they must unite and present a united front.

When the accredited committee of this organization went to Dover about this bill we were met with smiles by the members of the committee, and they told us: "Why, gentlemen, three or four of your big men have been down before this committee and have told us that that bill was not a good bill, and we are going to keep it in committee." Mind you, the accredited representative body of this organization being told that by the legislative committee!

Now, we must be united if we are going to get anywhere, and the only way you can keep the men united is by making them obey certain rules. What is the use of passing resolutions if certain individuals are going to place themselves higher than this organization? I am not slapping at anybody. The men who will be hurt by this are my friends, but if my own brother, as much as I love him, had been one of those men, this resolution would have gone in just the same. I feel very deeply about it.

DR. FORREST: I move that the motion of Dr. Mayerberg be laid on the table.

DR. TARUMIANZ: I second that motion.

PRESIDENT SPEER: You have heard the motion of Dr. Forrest, which has been seconded. Are you ready for the question? All in favor say aye. Opposed? Those voting aye will please rise. Those voting no please rise. The ayes have it.

Gentlemen, the first scientific paper we have on the program is "The Etiology and Treatment of Acne Vulgaris", by Dr. Allen D. King, of Wilmington.

... Dr. King presented his prepared paper, which was discussed by Dr. Ira Burns.

PRESIDENT SPEER: Is there any other discussion of Dr. King's paper?

In view of the fact that Dr. Burnett has not arrived yet, I will ask Dr. Newell R. Washburn, of Milford, to present his paper on "Cystitis: Its Cause and Treatment."

... Dr. Washburn presented his prepared paper, which was discussed by Drs. B. S. Vallett and V. D. Washburn.

PRESIDENT SPEER: Is there any other discussion on Dr. Washburn's paper? I want to take this opportunity on behalf of the Society to thank Dr. King and Dr. Washburn for their able papers.

Article IV of our By-Laws says: "The House of Delegates shall be the legislative and business body of the Society." When we as component societies elect our House of Delegates, we elect men, or should elect men in whom we have confidence. Those men take certain action, and other members who are not delegates have

an opportunity to go to the meetings of the House of Delegates and express an opinion, and if they do not avail themselves of that opportunity, I do not think that they should take active measures to undo what the House of Delegates has attempted to do.

No House of Delegates can think for me, nor for anyone of us, and on that same principle Dr. Woodward cannot think for me, and regardless of what others may think of Dr. Woodward, I can also retain my own opinion. It is very discouraging to hear such remarks as this: that the House of Delegates is not the representative body of the Society; and: that the things that the House of Delegates does and decides upon should not be accepted. If that is true, then those men should not be elected as delegates. But when anyone of us does not agree with what the House of Delegates does, we should at least go and say so before them.

This proposed Medical Bill that a lot of us gave a lot of time and effort to isn't perfect, but, gentlemen, we were doing something for this Society, or at least we felt that we were. My fight has been all year, as you know, against quacks and fakers, and we, in combination with the Homeopathic Society, felt that we were doing something to unite the medical profession of this state, and with a united front we would be better able to combat things that we are going to have to combat, and, as I told you this morning, in my opinion very much more so in the next twenty-five years than we do even today. After working as we did and trying to perfect this thing, then to appear before the committee—because we were given to understand that the committee in the legislature was not bringing that bill out due to chiropractic and osteopathic interference—to get down there before that committee and have one of the committee, when I was talking, point his finger right at me and say: "Dr. Speer, four of your own men from your own Society stood right on the spot on which you are standing and combated this bill"—it was very discouraging.

I say, gentlemen, if any of us have anything to do, let's do it in our Society, but once the Society as a whole has decided, let's stand back of that, or at least do not be actively against it. As to notifying people, as I told the House of Delegates last night, every one of the House of Delegates was sent a notice of every meeting in due time, and a lot of them I sent because I made them out in long hand in order to get them out on time. Everything we have done has been an honest attempt for the benefit of this Society, and there has been no meeting that I have had anything to do with in which just a few men were notified and others were not. I am sorry Dr. LaMotte is not here to hear this, but he inferred, as you know, that some people would get notices only, so that the thing could be controlled. That is absolutely not the case.

Now, gentlemen, let's get that all out of our system; it is all over the dam. Let's take the word of the House of Delegates, or else let's not have any House of Delegates and have all open meetings, and then everyone can express their opinion and we will not rely on delegates. That is all.

Dr. Burnett has not arrived, so, on motion of Dr. Tarumianz, seconded by Dr. Bastian, we will adjourn the scientific meeting until two o'clock this afternoon.

... Adjournment at 11:45 a.m. ...

September 26, 1933

TUESDAY AFTERNOON SESSION

The meeting convened at 2:00 p.m. o'clock at the Delaware Academy of Medicine, Dr. William H. Speer presiding.

PRESIDENT SPEER: The afternoon session will please come to order. We have for the first paper this afternoon "Treatment of Perforative Appendicitis," by Dr. W. E. Burnett, Philadelphia. I want at this time to introduce Dr. Burnett.

... Dr. Burnett presented his prepared paper and

showed slides illustrating same . . .

PRESIDENT SPEER: Is there any discussion of this paper? Hearing no discussion, I want to personally thank Dr. Burnett in behalf of the Society for presenting this paper. We appreciate it.

The next paper on the program for this afternoon is "The Diagnosis and Treatment of Lesions of the Cranial Nerves," by Dr. W. E. Dandy, of Baltimore.

Dr. Dandy then presented his address which was discussed by Drs. A. J. Strikol, M. A. Tarumian, E. R. Mayerberg, I. M. Flinn, W. H. Bonner, and Lord.

PRESIDENT SPEER: It certainly is very gratifying to sit here as president and see the interest taken in a paper. I want to take this opportunity as president of the Society to thank Dr. Dandy in the name of the Society for his very interesting talk.

I want to take this opportunity also to announce that the Delaware Committee of the American Society for the Control of Cancer will present a three-reel motion picture in this hall tomorrow evening, September 27th, at 8:00 p.m. All physicians and nurses are invited. This series of three reels has been brought from the headquarters of the American Society for the Control of Cancer by Dr. Herring, who has charge of the exhibit upstairs. Due to lighting facilities, etc., it has to be shown at night, and he has consented to allow the reels to stay here under the guidance of Dr. Gay, and they will be shown here tomorrow evening.

The next paper we have on the program this afternoon is "Choice of Physician Under Workmen's Compensation Laws." I want to present Dr. Loyal A. Shoudy, chief surgeon of the Bethlehem Steel Company.

Dr. Shoudy then presented his paper, which was not discussed.

PRESIDENT SPEER: Gentlemen, the next paper on our afternoon's program is "Rocky Mountain Spotted Fever," by Dr. Rolla E. Dyer, of Washington. I take great pleasure in introducing Dr. Dyer to the Society.

Dr. Dyer then presented his address, which was discussed by Drs. Morris Horwitz, P. W. Tomlinson, and R. O. Warren.

PRESIDENT SPEER: I want to take this opportunity, Dr. Dyer, to thank you for the presentation of this most interesting paper, on behalf of the Medical Society of Delaware.

We have the final paper of this afternoon: "The Family Doctor and His Responsibility to the Pre-tuberculosis Child," by Dr. Joseph P. Wales, of Wilmington, who needs no introduction.

Dr. Wales then presented his address, which was discussed by Drs. L. B. Flinn, G. J. Boines, Ira Burns; and C. C. Neese, and Mr. D. E. Hinton.

September 26, 1933

TUESDAY EVENING SESSION

The General Public Meeting convened at 8:20 p.m. in the Ball Room of the Hotel duPont, Dr. William H. Speer, President, presiding.

PRESIDENT SPEER:

Ladies and Gentlemen:

As presiding officer of this meeting I am in a dual role, President of the Medical Society of Delaware on the one hand, and Mayor of your City, or rather I should say our City, on the other hand. As Mayor, you have all seen in the public press of my visit last week to the United States Conference of Mayors in Chicago, and I want to tell you right here after that visit and hearing of the conditions existing in other cities, Wilmington, Delaware, is a sweet place to live in, and I shall do all in my power to prevent our City from getting into the condition of some of the others.

As president of the Medical Society of Delaware and as Mayor of Wilmington, Delaware, I want to most heartily greet you this evening and welcome you to this meeting. The Medical Society of Delaware, which dates back without a break to May 12, 1789, is one of the oldest in America. It was on that date the first Convention was held at Dover, after the passage on Feb-

ruary 3, 1789 of the Act creating this corporation. All through these ensuing years it has been the object, as set forth in part of Article 1 of our By-Laws, "to enlighten and direct public opinion in regard to the great problems of state medicine, so that the profession shall become more capable and honorable within itself, and more useful to the public, in the prevention and cure of disease, and in prolonging and adding comfort to life."

With that purpose in view we have invited you here this evening. You have all seen how this Society has waged a war on medical racketeers the last year, and we will continue to do so for your good.

Our speakers this evening are all nationally known and I know they will have a message for you that will be beneficial. The first of these speakers whom I will introduce to you is Dr. Thomas S. Cullen, Trustee of the American Medical Association and Professor of Gynecology at Johns Hopkins University. The subject of his address will be "The Early Recognition of Cancer." I take great pleasure in introducing to you Dr. Thomas S. Cullen.

Dr. Cullen then presented his address which was listened to with rapt attention.

PRESIDENT SPEER: Ladies and gentlemen, this subject that Dr. Cullen has just discussed is one of the greatest importance. Cancer seen early can be helped; cancer delayed is very questionable. Your family physician is your sheet anchor, not Lydia Pinkham's or Natex, or anything of that sort, but your family physician, and because so much good can be done there is a widespread movement all over this country by the American Society for the Control of Cancer. We are very active here in Delaware and in every hospital in this state. Two clinics have already been started. You are not to be divorced from your family physician. Your family physician still will maintain supervision of your case, but these clinics are for your good and to help your family physician in the early diagnosis of such conditions, and too much stress cannot be laid upon early diagnosis.

The next speaker that we have is Dr. Dean DeWitt Lewis, President of the American Medical Association, and Professor of Surgery, Johns Hopkins University. The subject of his talk is "The Solution of Problems in Medicine." I now take great pleasure in introducing to you Dr. Dean Lewis.

President Lewis then delivered a stirring address, explaining to his lay audience how organized medicine is constantly evolving better things for the people, often with no thought of the benefit that may accrue to the individual physician. The audience was visibly impressed by his remarks.

PRESIDENT SPEER: Dr. Lewis has told you that the medical profession is always trying to improve methods which are for the betterment of the public. While those who advertise medicines of this sort and appliances of that sort try to make you believe that the medical profession is wrong, that they are only trying to take your money, those people are doing it for the sole purpose of taking your money. You must have faith in the medical profession because it is there that your health is guarded, and not by these medical racketeering propositions.

The next speaker is Dr. Alfred Stengel, Vice-President in Charge of Medical Affairs, University of Pennsylvania, and Professor of Medicine at the University of Pennsylvania. He is going to talk on "Medicine, Past and Present." I take great pleasure in introducing Dr. Stengel.

Dr. Stengel then gave a most informative address on the scientific advances of the profession, especially those within the past fifty years.

PRESIDENT SPEER: Thank you, Dr. Stengel. It is 23 years since I sat in the benches and listened to Dr. Stengel as one of my professors, and I will say that it is just as interesting to listen to him now as it was then. I am very happy to hear what he says about the family physician. The family physician has a feeling to-

ward his patients that the patients can upset sometimes by not thinking. They listen to someone else, and instead of being frank with their family physician they will go over his head and consult someone else. The correct way to do it is to be open, be frank and honest, with yourself and with your physician, and if you feel that you would like to see someone else about some special ailment, no doctor, no family physician is going to say no. If he feels that it is a just request, he will even make the consulting hour for you, and if he has the time he will go with you. But if he tells you, as Dr. Stengel has said, that it isn't necessary, he is doing it for your own good. Stick to your family physician and you will find that in the end it is always the best way.

The last paper of the evening is by Dr. Arthur J. Cramp, Director of the Bureau of Investigation of the American Medical Association. He is going to talk about "Pink Pills and Panaceas." I take great pleasure in introducing to you Dr. Cramp.

Dr. Cramp then delivered an address, profusely illustrated with lantern slides, on the patent medicine business and similar items. The subtle humor which was interspersed among his serious remarks was one of the most effective parts of the address.

PRESIDENT SPEER: Dr. Cramp, I want to thank you for that very interesting talk. Ladies and gentlemen, those things are all very amusing, but you have this same thing being perpetrated in Wilmington all the time, and the citizens of this town take it and like it. You have had it all summer and you still see the advertisement of the Natex man in Eckerd's drug store on Market Street. You see these same types of testimonials. The testimonial is written out and the person signs it, but when he signs it he also signs that the text of that testimonial may be changed by the Natex man. Those of you who keep informed of things, may have seen where I, as president of the Medical Society, had this man arrested two weeks ago for practicing medicine without a license. This is all done for the benefit of the public. It is to protect you. You are not supposed to know which are and which are not facts. It is the province of the Medical Society to protect you, and that is what we are trying to do.

The lawyer for this man, the Natex man—I know him personally—came to me and said: "Look here, Bill what is your object? If you will just drop this case this company will leave town. They have gotten all out of Wilmington they can get; they have milked it dry and are about to leave anyway, and if you will just drop it, they will leave." I refused to drop it. We are warring on medical racketeering, and that is what this type of thing is. But please remember we are doing it for the public's good. It is distasteful to us to have to get into the press and to have to go into court, and it takes time, but it is done with only one purpose in view, and that is to protect you who do not know.

I again want to thank all of you who have come here this evening, and I am sure that you have benefited in many ways. (Applause).

... Adjournment at 10:45 p.m. ...

September 27, 1933

WEDNESDAY MORNING SESSION

The meeting convened at 10:30 a.m. at the Delaware Academy of Medicine, President William H. Speer presiding.

PRESIDENT SPEER: Ladies and gentlemen, the first paper that we have for this morning's session is "Radium as a Therapeutic Agent," by Dr. Ira Burns, of Wilmington.

... Dr. Burns presented his paper ...

PRESIDENT SPEER: Is there any discussion on Dr. Burns' paper? If there is no discussion I want to thank Dr. Burns for the Medical Society for presenting his paper.

The next paper that we have for this morning is "The Treatment of Myoma Uteri", by Dr. Floyd E. Keene,

of Philadelphia. I do not think that Dr. Keene needs a formal introduction, because I think most of the men are acquainted with him personally and through his work. I take great pleasure in presenting Dr. Floyd E. Keene to the Society.

... Dr. Keene presented his paper, which was discussed by Drs. C. P. Noble, and J. P. Wales.

PRESIDENT SPEER: Gentlemen, the third paper this morning is by Dr. Claude Uhler, of Farnhurst, on "Psychopathic Personality Among Children."

... Dr. Uhler presented his paper, which was discussed by Dr. M. A. Tarumianz.

PRESIDENT SPEER: Is there any further discussion on Dr. Uhler's paper? I want to take this occasion to thank Dr. Uhler on behalf of the Society for his very interesting paper.

The last paper we have on the convention program is "Prevention and Care of What is Called Old Age" by Dr. Charles P. Noble, of Radnor. I think nearly all of us know Dr. Noble.

... Dr. Noble presented his paper, which was discussed by Drs. W. E. Bird, O. V. James, W. O. LaMotte, M. A. Tarumianz, P. W. Tomlinson, and Millard Springer.

PRESIDENT SPEER: Is there any further discussion? If not, I will take this opportunity to thank Dr. Noble for his very able paper, on behalf of the Medical Society of Delaware.

SECRETARY LA MOTTE: It has been suggested that as a matter of respect to the octogenarians the Society rise.

VOICE: Dr. William H. Hancker also belongs to the same age, and has been incapacitated for the last five years—blind and deaf, etc. I would like to include him in this list.

... Convention rose in respect to octogenarians ...

DR. D. T. DAVIDSON: As secretary of our County Society, the matter of the older men has been giving us some concern and some thought. There are a number of men in each one of our component societies who are getting older, and some men are incapacitated. I was talking with Dr. Stambaugh last night, and I understand there is one man in Sussex who is infirm, and we really should make some provision for these older men as they become infirm and are not in active practice and no longer able to do the things they could to pay their county dues, and that sort of thing.

There is a provision in our New Castle County By-Laws whereby the Board of Directors may omit the dues in their own discretion to any member, and no one outside of the Board of Directors will know the name of the beneficiary. However, we are still under obligation to pay the dues for that man to the State Society. Our dues happen to be \$10 a year, and half of that goes directly to the State Society and half for our own use. It would seem to me that the State Society might well join hands with the county societies and make suitable provision for taking care of these men in some emeritus fashion. I, therefore, would propose a new section to Article VII of the State By-Laws which pertain to the duties of the Council. The newly added section would read:

"Article VII, Section 7—The Council, upon recommendation of the Board of Directors of a component society, shall have power to remit the dues, assessments, and other financial obligations to the Society of any member who on account of sickness, age, or other legitimate cause is unable to pay the same. The name of the beneficiary shall be known only to members of the Council."

PRESIDENT SPEER: Gentlemen, you have heard the reading of the resolution, what is your wish? It has to be voted on next year; however, it can be approved at this time.

VOICE: It isn't necessary that that be voted on. It is just submitted at this meeting, and voted on at the next meeting.

SECRETARY LA MOTTE: The secretary of each county society has to be notified at least a month or two months before the next annual meeting.

PRESIDENT SPEER: The resolution will be put on record and the usual procedure will follow.

DR. TARUMIANZ: Mr. President, since yesterday morning's session I have been thinking very seriously how we could eliminate serious difficulties among our county societies as well as the State Medical Society. I don't think it is fair that the Society should be compared in the newspaper to a sewing circle and whatnot. I don't feel that reporters should have any privilege to take such a portion of a resolution and publish it in the newspapers, which is certainly not to our credit. To eliminate such serious difficulties in our midst, I feel that we should have definite representation in our House of Delegates. I think you will all agree with me that the House of Delegates has never represented the whole Society as such, not since I have been a member of it. It has always been representative of a group—whether a group of Speer's or a group of Springer's, or a group of this or that doesn't make any difference; it has always represented a group. The majority simply didn't have much to say, because everything was voted upon by the representatives of that particular group, and, therefore, the majority suffered severely.

You may consider that I belong to some group. It doesn't make any difference whether you do or not. I do not wish to mention any individuals or members, but I am trying to eliminate such a situation. I feel that if our county medical societies could elect their delegates not by the method used in the past but by a new method which is more accepted in new world affairs, if you wish to consider it so—by majority acclaim from the floor, then those delegates will represent the majority of the members of the society. That is first.

Second, when this particular House of Delegates meets and decides on serious matters pertaining to each individual member of the Society, it should have a vast majority present. I propose to change Section 5 where it says: "Ten members of the House of Delegates shall constitute a quorum", so that it shall be "Five-sixths of the members of the House of Delegates shall constitute a quorum", which always will bring a vast majority of the members of the House of Delegates.

PRESIDENT SPEER: You mean to propose that as a resolution for the change of the By-Laws, to change Section 5 to read that five-sixths of the number of members of the House of Delegates shall constitute a quorum, in lieu of ten members?

DR. TARUMIANZ: That is right.

DR. MAYERBERG: If Dr. Tarumianz has attended the county society meetings—I believe he has most of them—he will have noticed that when it comes time to nominate delegates each year, a list is brought in, but it is not mandatory to adopt that list. Every single member of the society has the right to nominate from the floor, and oftentimes I have seen men eliminated from the original list and replaced by men from the floor, so that thing is out of order.

Now, the next thing is this, which he spoke of: finding some method whereby certain groups shall say so and so shall be elected. Dr. Tarumianz, I am afraid, belongs to the class of the die-hards. He thinks—and he is probably right—that the situation has swung from one group to another group. However, I don't think we should have groups, and we don't have groups. I happen to know that in every single House of Delegates meeting held this year, during your administration, every single member of the House of Delegates had due notice of those meetings. If they didn't get to them it wasn't anybody else's fault but their own. You have to have a low number as a quorum or you would never have a meeting, because you can't get five-sixths of them, or any such number, out to those meetings.

I still maintain that a man elected to the House of Delegates is elected because he is a representative of the organization, and his thought and act is just as sincere and just as good as any other man who stayed away. There is no need to increase the number for a quorum. I am opposed. I think the thing is as it

should be.

Regarding Dr. Tarumianz's criticism of yesterday, I felt it my duty to do as I did do at that time on that resolution. I regret that it got into the paper. I had nothing to do with that any more than he did. I think we ought to censor those things before they get into the paper.

PRESIDENT SPEER: As far as being opposed to it now, Dr. Mayerberg, it is proposed as a resolution to change the By-Laws, and the argument on it will come next year.

SECRETARY LA MOTTE: Dr. Tarumianz presents that in writing, and it goes automatically over to next year. This provision that each county society has to be notified a certain number of days before it is voted upon at the House of Delegates, is a safeguard against rash actions, and that is the objection that some of us have: taking various steps involving very serious principles on short notice; calling together special meetings of the House on not even thirty days' notice. The object has never been stated. Lots of people are too busy to go to those meetings on a week's notice.

DR. BASTIAN: The resolution must be presented in writing, but let me say this—we have fourteen delegates this year, and to make it a number like five-sixths would be hard.

PRESIDENT SPEER: We have eighteen: three from Sussex, three from Kent, and twelve from New Castle.

DR. DAVIDSON: I wish to comment on the same point that Dr. Bastian has. Our present House of Delegates this year is eighteen men. That would make fifteen necessary for a quorum.

PRESIDENT SPEER: The thing will have to be discussed, Dr. Davidson, when we vote on it next year.

DR. DAVIDSON: May I say on this discussion of the quorum, any comment as to the method of election of delegates by county societies is entirely out of place in this building? That is a county matter.

PRESIDENT SPEER: Is there any further thing to be brought up from the floor?

DR. MAYERBERG: I would like to make a motion that a vote of thanks to be given to the Delaware Academy of Medicine, and to the officers of the Delaware Academy of Medicine for their courtesy in the use of this building during this session.

... Motion seconded and carried unanimously ...

DR. McELPATRICK: I move that we send a written vote of thanks to the management of the Hotel du Pont, for their kind and courteous entertainment of us, and the cooperation and help they have given us during this convention. They provided us last night with the largest room they had, the ball room, and we are due there today at one o'clock for the luncheon. I think it is fair that we recognize that.

... Motion seconded and carried unanimously ...

DR. MAYERBERG: I move a rising vote of thanks to the President, the Scientific Committee, and the Program Committee for the program this year.

... Rising vote of thanks ...

PRESIDENT SPEER: I think this has been a wonderful program that they have produced for us, and the specially remarkable thing about it is that there was not a cancellation. Every man who was on the program came. There was no reading of the address into the record, and I think they deserve special credit for that. The program committee did wonderful work.

If there is no further business we will proceed to the election of the president for the ensuing year. I will entertain nominations.

DR. T. J. MAC COLLUM: It is my privilege to nominate Dr. Joseph S. McDaniel, of Dover, who has been unanimously selected by the Kent County Medical Society as their nominee.

DR. TARUMIANZ: I move that the nominations be closed.

... Motion seconded ...

PRESIDENT SPEER: Gentlemen, you have heard the nomination, and you have heard the motion, which was

seconded. Are there any remarks? All in favor say "Aye". Opposed?

... Motion carried unanimously ...

... Motion was made and seconded that the secretary cast a ballot for Dr. Joseph McDaniel as president for the ensuing year ... Motion carried ...

... The newly elected president was escorted to the chair ...

DR. JOSEPH MCDANIEL: I will take this opportunity to thank you for the confidence you have had in me to elect me to this high office. I also want to thank the members 100% from Kent County Medical Society. I also want to say that whatever differences there have been in the past will be forgotten. I hope all the members who have come to me with little differences and opposition, etc., will consider that I am still the same friend as ever.

I would like to say that next year we hope to have as nice a program as we have had here. It will be in Dover, and I certainly will do my best to have the best program possible. Please accept my thanks again, and I hope I will be able to live up to what you expect of me in running this Society. I hope you will cooperate with me and that we will have harmony, and I will do my best to run it in the right way.

PRESIDENT SPEER: This concludes the program for the convention of this year. I want to thank you all for the interest you have taken, and I hope that you all have gained something from these meetings. I know that I have personally.

... Convention adjourned at 1:10 p.m. ...

Two official luncheons and one dinner comprised the social side of the meeting, on Tuesday. The Society was then given a buffet luncheon at the Delaware Academy of Medicine, as the guests of the New Castle County Medical Society. On Tuesday evening the members were the guests of President Speer at a dinner in the Club Room of the Hotel duPont. Finally, on Wednesday, the Society's official luncheon was held in the DuBarry Room of the Hotel duPont, at which time the chief postprandial remarks were made by President Speer. Mrs. Robert W. Tomlinson, president elect of the National Woman's Auxiliary, and Mrs. Henry B. Thompson, whose activities in mosquito control and in the re-erection of the Delaware Academy of Medicine building have won the praise and the thanks of the profession of the whole state.

MEDICAL SOCIETY OF DELAWARE

Transactions: House of Delegates

September 25, 1933

The meeting of the House of Delegates of the Medical Society of Delaware convened at 8:45 p.m. at the Delaware Academy of Medicine, Wilmington, Dr. William H. Speer, President of the Society, presiding.

PRESIDENT SPEER: Gentlemen, the meeting of the House of Delegates will please come to order, and the secretary will call the roll.

... Secretary LaMotte called the roll ...

PRESIDENT SPEER: The next is the reading of the minutes. Mr. Secretary, will you read the minutes of the last House of Delegates regular session.

... The motion was regularly made and seconded that the reading of the minutes of the last regular session be dispensed with. ...

PRESIDENT SPEER: Are there any remarks or any objections? Hearing none, it is so ordered.

I will now appoint the Committee on Nominations. I will appoint Dr. P. W. Tomlinson, Dr. O. V. James and Dr. G. V. Wood. Will those three gentlemen retire?

... President Speer read his report, as follows:

Report of the President

In making this report I want first to thank the officers and members of committees for the support they have given during this year.

It will not be necessary for me to go fully into all activities, as I have reported monthly to you by means of THE JOURNAL. (I often wonder if the monthly reports are interesting and worth while enough to continue them.) We have attempted to carry out things which we believe you want and which were for the benefit of the profession and the citizens of this State.

I have not as yet made my official visit to the Kent and Sussex Societies but hope to do this at a joint meeting in November, for which I have a paper prepared. These visitations were not made because we were working on Medical Society matters in the Spring which we felt were important, and I knew I could make them in the Fall.

Several meetings of the House of Delegates were held and much important business transacted; among these things the outstanding effort being the approval of the proposed new Medical Bill which I have informed you before was killed by our own members. I believe we will live to see the day when we will be sore and they will be sorry because of this action. The Legislative Committee was very active and tried to put across good work. If we had been able to get our new Bill approved, a great deal more in the way of ridding out unlawful practices could have been attempted; but we are handicapped because it is believed we are not united. As it was, we stopped several who were practicing unlawfully and have one now held for Superior Court, namely, the "Natex" man. Let me here commend the Municipal Court authorities, the Judges, and the Attorney General's Department for their cooperation. It is proof they all want to protect the people. I hope the succeeding officers will carry on with what we have started, and soon Delaware will be known as the place for medical racketeers to keep away from.

The meeting at Farnhurst in May was well attended even though it was Democratic weather. Such a meeting tends to better relationships among us and proves we do not all have horns.

I would like at this point to say a few words in reference to our duty as citizens with regard to civic matters. I allowed my name to be used as a candidate for Mayor of this city because I feel it is within our province as a group of professional men to do all we can for bettering conditions, not only of health, but of government. I am more convinced now than ever that this is correct. As I have told you before, I am still a physician and will always be. I am in politics from the true meaning of the word. Mr. Webster says, "Politics is the management of public affairs in the interest of peace, prosperity, and the interest of the citizens of the community". "A politician is one who practices politics for personal advantage". I am in politics, yes, but I am not a politician.

I will now give you in chronological order the different activities:

- 1—Feeling that I should work for the interest of the Society, even though I had not yet taken office, I began the now much known Ghadiali case, with the result, after several months, of having him fined by the court, and so putting a stop to his racketeering.
- 2—In November, we stopped a spurious rupture cure from getting started. They left without our having to arrest them.
- 3—A special meeting of the House of Delegates, in Dover on January 4 was called to discuss medical economics and to discharge special committees so the president could appoint new ones. This meeting resulted in resolutions as follows:

First: It is the sense of this meeting that the proposed clinics are not needed at this time for economic reasons, and any money for clinic purposes which may

- be available be applied to those clinics already established.
- Second: That the indigency for medical care be proved by the family physician, to his satisfaction.
- Third: That the case be sent to the family doctor for his disposal.
- Fourth: That a bill be introduced to provide funds for payment to the individual doctors for treatment of indigent cases; these funds to be handled by the State Board of Health.
- 4—Met with the White House Conference Committee on January 9. Approved of their action from the standpoint of the Medical Society.
 - 5—Asked Century Club not to introduce chiropractors as "Doctor". Request complied with January 12.
 - 6—On January 23, met several of the committees at different hours and at 4 P. M. had special meeting of the House of Delegates. The proposed Medical Bill was discussed, and the following resolution adopted:
Whereas the Delaware State Hospital is crowded far beyond its capacity, be it therefore resolved that the House of Delegates of the Medical Society of Delaware is in accord with the effort of the Superintendent and Trustees of the Delaware State Hospital to secure this building as soon as vacant, to house and treat patients, and to procure, if available, funds from the state for the necessary changes and equipment. It is understood that this expense will be kept as low as possible at the present time.
 - 7—On January 20, met with Mr. Walter Dent Smith and Mrs. Borton, of the Relief, with the result that they agreed to pay the actual expenses to doctors for calls to the indigent poor.
 - 8—On January 21, inspected State Hospital with Committee.
 - 9—February 3. Special meeting of the Legislative Committee to discuss proposed new Medical Bill with Homeopathic Society representatives. The consensus of a large majority was in favor of the new Bill.
 - 10—February 20. Special meeting of House of Delegates called for final action on Medical Bill. Passed as approved unanimously.
 - 11—February 22. Met Dr. Woodward of the American Medical Association, in Atlantic City. Discussed the new Bill, which he approved.
 - 12—March 8. Went to Dover and spoke on proposed new Medical Bill to Kent County members. No action could be taken as there was not a quorum present.
 - 13—March 10. Caused the W. S. Rice rupture cure man to leave without trouble. Was assisted by the Police Department of the City.
 - 14—March 15. Special meeting of House of Delegates in Dover, to which everyone was invited.
RESOLVED, that every member of the State Society is in duty bound to support it.
 - 15—March 23. Spoke to Federation of Women's Clubs in Dover.
 - 16—March 29. Special meeting of Committee on Public Policy and Legislation at which there was a wide discussion of the new Medical Bill.
 - 17—April 4. Talk for Anti-Tuberculosis Society over the radio.
 - 18—May 16. Outing at Farnhurst. Special meeting of House of Delegates.
 - 19—August 10. Went to Dover and interviewed John P. Leverage, who advertised to cure skin cancer.
 - 20—September 10. Had "Natex" man arrested for violation of our Medical Practice Act and Judge Lynn held him for upper court.

These are twenty of the main attempts at keeping the Society alive and doing the things which your officers and committees have done. I hope they meet with your approval.

I thank you.

PRESIDENT SPEER: I hereby wish to submit this to the recording secretary. We will now hear the report of the secretary.

Secretary LaMotte reported as follows:

Report of the Secretary

This year has not been less hectic than any other year. By the way dues have been paid it is evident that many of our members have had no easy time. Nevertheless we have 178 members in good standing, as against 177 last year. We have had 14 new members and one death, leaving 12 who have had to be dropped for nonpayment of dues.

The president called five special meetings of the House of Delegates. The first meeting was January 4th at Dover; the second, January 23rd, in the duPont Hotel, Wilmington; the third, February 20th, at the Academy of Medicine, Wilmington; the fourth, March 15th, at Dover; the fifth, May 16th, at the Delaware State Hospital. The president arranged for the stenographers. I received no report of the first or second meetings. However, the calling of the first meeting, as stated by Dr. Speer in the notice I sent out, was "for the purpose of discussing medical economics, with a special reference to the proposed action of the White House Conference Continuation Committee, and as well for the purpose of discharging certain special committees, that I may appoint these committees". Subsequent notices were sent out on forms prepared by the president. The third meeting held at the Academy of Medicine, February 20th, as reported to me, is as follows:

... It was then regularly moved and seconded that the reading of the details of these special meetings be dispensed with...

PRESIDENT SPEER: Are there any remarks or objections? It is carried.

The report of the fifth meeting, at the State Hospital, May 16th, is as follows:

A special meeting of the House of Delegates was held on May 16th, 1933, at the Delaware State Hospital, Farnhurst, Delaware, at which meeting a quorum was present. It was regularly moved and seconded that bills for lawyers fees, stenographic work and supplies to the amount of one hundred and thirty dollars (\$130.00) be recognized, and the Finance Committee be authorized to pay this same out. This motion was carried unanimously. The President brought up for discussion the establishment of fresh air suites in the schools of Wilmington. After a prolonged discussion it was moved and seconded that this situation be referred to the State Society convention in September. This motion was carried. A motion was then made to adjourn.

(Signed) W. H. SPEER, M. D., Pres.,
Medical Society of Del.

No bills for these meetings, except a bill of \$5.00 from Hotel Richardson, \$37.00 from Dr. McDaniel for refreshments and \$7.00 for special luncheon at du Pont Hotel, have been received by the secretary or the Finance Committee, and therefore none but these have been paid by the society.

I do not know who is being considered for the Nominating Committee, and have not been asked for a roster of those eligible for office or committees. In all probability this is the first time in the history of our 144 year old Society that the secretary has been ignored, at least it is the first time in the 42 years of service of Dr. Palmer, Dr. Forrest and myself. No person who has not been a member of the Society for two years is eligible to office, and no person who is not now a member in good standing can legally be appointed on a committee. The secretary will not be responsible for any mistakes made.

I regret that new Castle County Society did not re-

turn Dr. Forrest to the House, because he was of so much assistance to me when I became secretary, and because I have always found him on the spot; and his advice, due to his experience, invaluable.

Some of our members do not know what becomes of their five dollar dues in the Society. Two dollars go for THE JOURNAL, one for the medical defense fund, and somewhere around a dollar for the annual luncheon. This leaves about one dollar to run the Society. You will notice that we have accurate and complete reports of our annual meetings, and if you attend throughout to the end of our session on Wednesday you will realize that a lot has been said to report. If you listen to the reports of the treasurer and the manager of THE JOURNAL you will think, I am sure, the Society is in a pretty fair financial condition for this fourth year of depression. A year or so ago we had a few legal cases to care for. These were managed in a quiet way by our Council, which engaged one of our outstanding and most able lawyers. He was paid \$125.00 for services, which included the fee of another lawyer who was employed by one of the defendants before he applied to the State Society.

I must not fail to refer to the exhibits which have helped to finance us. Even this year of hard times we have five paying exhibitors.

I have just returned from Chicago, where I attended a conference of secretaries of the state medical associations. Dr. Dean Lewis talked on the "Quality of Medical Care." He referred to the new deal, and said what we should have is a square deal. Dr. Warnshuis reported a most elaborate, detailed, comprehensive medical survey made in Michigan. There was a good deal, amongst other things, said about medical education, including education of doctors. There were three addresses, two being by lawyers, on medical defense and subjects closely allied. Every one of these speakers emphasized the importance of not talking when a suit is entered against a doctor. It behooves each of us to observe this warning. We never know when our turn might come, and as someone said, a suit against a physician is a threat against the security of all physicians. I doubt whether a dozen doctors today know about the legal cases that our Council managed, and the public certainly did not become informed.

I want to thank Dr. Bird for helping with the correspondence of this office during my absence out of town this summer, and for his aid in completing the program.

... Motion regularly made and seconded to adopt the secretary's report. Motion carried unanimously.

PRESIDENT SPEER: We will have the treasurer's report.

SECRETARY LA MOTTE: Dr. Rumford brought this report to me. He said his mother had been ill, and he didn't want to leave her.

... Secretary La Motte read the treasurer's report, as follows:

Report of the Treasurer (Summary)

GENERAL FUND

September 20, 1932—Balance forwarded\$1,032.82

Receipts

Dues, New Castle Co. (119) \$595.00
Dues, Kent County (25) 125.00
Dues, Sussex County (28) 140.00
..... \$860.00
Womans Auxiliary 24.00
Exhibition Spaces 45.00
Dividends: Bank Stock 54.60
Interest on Deposits 2.30

Total 985.90

\$2,018.72

Disbursements

Subscriptions to JOURNAL\$686.00
Annual Session: Misc. 148.16
Special Meetings: H. of D. 49.00
Medical Stenography 159.88

Printing and Postage 43.20
Secretary's Expenses 25.25
Treasurer's Expenses 3.25
Check Tax56
Transf. to Medical Defense 343.00

Total 1,458.30

September 22, 1933—Balance on hand \$ 560.42

DEFENSE FUND

September 20, 1932—Balance forwarded \$2,873.68

Receipts

Dues, per capita\$168.00
Interest on Deposits 111.79

Total 279.79

\$3,153.47

Disbursements

Counsel fees 150.00

September 22, 1933—Balance on hand \$3,003.47

PRESIDENT SPEER: Are there any remarks about the treasurer's report? I will appoint Dr. Butler, Dr. Parsons, and Dr. Booker as an Auditing Committee.

We will have the report of the Committee on Scientific Work.

... Dr. LaMotte read the report, as follows:

Report of the Scientific Committee

This committee has consulted, mostly through correspondence.

The meeting of the House of Delegates Monday evening instead of Tuesday morning, and the scientific sessions on Tuesday and on Wednesday morning were arranged in accord with the desires of Dr. Speer. As has been our unflinching custom, the president was consulted as to his desires concerning the program. He named two doctors he wished to have on the program and kindly consented to take the matter up with these men. One is on the program.

Two years ago some of us thought it would be beneficial to have a program for the benefit of the public. We had Dr. Bloodgood and Dr. Fishbein, and it seemed to be such a success that we decided to have a similar meeting this year. We feel that we should be proud to have for this occasion speakers of such calibre and standing. In preparation for this meeting the Womans' Auxiliary has rendered service by sending a thousand notices to members of women's organizations.

The question of scientific exhibits as a means of education was emphasized at the recent conference in Chicago. We have such an exhibit on our program. We should probably give this subject more attention in the future because such exhibits are more valuable to us than many papers we hear read.

... It was regularly moved and seconded that the report be accepted. Carried unanimously.

PRESIDENT SPEER: We will have the report of the Committee on Public Policy and Legislation, Dr. J. D. Niles, Chairman.

Report of Committee on Public Policy and Legislation

I might say for the benefit of the Society that it is surprising the dispatch with which the American Medical Association gets the different bills that come up in our legislature, and has the legislative committee on the job. I don't believe that forty-eight hours would be exaggerating in making that statement. The bill is brought into the legislature, and inside of forty-eight hours it is in the hands of the chairman of the legislative committee. I am going over some of these bills, and I will tell you how we met them.

On March 20th, Senate Bill S. 133, to amend the workmen's compensation act, proposes to compensate employees who contract in the course of their employments any one of certain named occupational diseases.

After duly considering that bill we just let it lay as it was.

On March 3rd, H. 422, to amend Chapter 31 of the Revised Code of the State of Delaware relating to the Delaware State Board of Examiners in Optometry. We let that ride as it stood.

On February 25th, S. 133, to make occupational diseases or injuries cause for compensation under the workmen's compensation act. That was satisfactory.

February 7th, H. 91, extend time from one to two years to file suits in case of personal injuries. When I say that stands, it means that the legislative committee had no objections to it.

February 11th, S. 65, repeals the law authorizing State Board of Health to appoint a corps of oral hygienists. We let that stand.

February 22nd, H. 169, to amend, revise and consolidate the laws regulating the practice of dentistry, dental surgery, and oral hygiene in this State, and for this purpose to repeal certain existing laws relating thereto, and to substitute for the same the revision and consolidation set forth in this Act, to become and be Chapter 30 of Title Six of the Revised Code of Delaware. H. 179, to regulate the occupation of beauticians in the State of Delaware. That is an interesting one we held up. They had passed that bill through the House of Representatives, and I was notified early one morning by phone by Dr. Jost that it should be held up, and immediately I sent a telegram to Dr. Hopkins and he held that up in the committee, and then their attorney, Mr. Coats, found out that we were holding this up in the committee and came to me and asked what the objections were. In the meantime I had brought the subject up to the members of the Delaware State Medical Society, including our president, and as near as I can remember I think it was thoroughly discussed and gone over by Dr. Bird, and several members that I can't remember, late one evening, and then after a good deal of correspondence and urging the legislative committee decided that they would let it go through with the corrections and the petitions accepted, and this is my letter to Dr. Robert Hopkins on March 6, 1933: "Dear Sir: Since the correction of the original petition bill the legislative committee of the Delaware State Medical Society has no further objections to it and does not in any way wish to oppose it. Yours truly, J. D. Niles." And that was taken care of.

February 15th, H. 142, to amend, revise and consolidate the laws regulating the practice of dentistry, dental surgery and oral hygiene in this State. I read that.

February 27th, H. 278, an Act to amend Chapter 100 of the Revised Code of Delaware as amended by Chapter 214, Vol. 30, Laws of Delaware, prohibiting the sale of narcotic drugs. We did nothing. We considered that in good shape to let stand.

January 24th, H. 15, to regulate the occupation of beauticians. I just covered that. H. 15, proposes, to create a state board of examiners of beauticians and to regulate the practice of beauticians. Licentiates are to be authorized to give "treatments affecting or acting upon the skin of the face, scalp or body" and to use electrical appliances and other devices in connection with any of the authorized treatments and practices. We cut that all out of their bill and ground them down to what we felt was a conservative condition.

On January 25th, H. 33, in relation to the Delaware workmen's compensation law of 1917. We made no corrections there.

January 27th, S. 20, an act to amend Chapter 146 of the Revised Code of Delaware in reference to limitation of personal actions. We made no corrections there.

Here are some long drawn out minutes of the special meeting of the Committee of Public Policy and Legislation of the Medical Society of Delaware. I think that you know most of it.

I want to take this opportunity of especially commending Dr. John Mullin, Dr. Wid Marshall, Dr. William Speer and Dr. LaMotte for their prompt and untiring assistance in carrying out the work during the

past year of the Public Policy and Legislation Committee.

The first meeting was called January 12, 1933 by myself and held in the office of Dr. John H. Mullin, Medical Arts Building. Those present were Dr. Wid Marshall, Jr., Dr. John H. Mullin, Dr. J. D. Niles. Dr. Julian Adair and Dr. Charles M. Handy representing the Homeopathic Society were present on invitation. The meeting was held by request of the Osteopathic Society, and was represented by Dr. Nason. The purpose was as follows:

The osteopaths wish to introduce a bill in our legislature that would give them more recognition and representation along the lines of osteopathic and surgical treatment, by creating a separate examining Board for osteopaths. The subject was discussed to some extent by all present, with the conclusion as follows:

That the subject would be presented to the Executive Committee of the Medical Society of Delaware for their approval or disapproval.

Shortly following this meeting, a meeting was called by our President Dr. Speer, and held at the Delaware Hospital. Members of the societies were invited. Dr. Nason representing the osteopaths, read a proposed bill. General discussion ensued, suggestions and objections carefully noted. After due consideration it was decided to reject the proposed bill, and that the present Medical Practice Act should be re-written embodying features that would be accepted, by all concerned, providing it safeguarded the welfare of our people. This was done, and read and discussed at a general meeting called by Dr. Speer, and held in the Academy of Medicine. General discussion ensued, corrections and objections noted, and it was decided to present it to a meeting of the Executive Committee of Medical Society of Delaware called by President Dr. Speer, and held in the duPont Hotel. After due consideration by this body, it was voted to accept the same.

After having our attorney properly prepare the bill, it was presented to the last session of the legislature, where it was not allowed to come out of the committee, due to outside pressure and influence. After a great deal of trouble, we were granted a hearing by the committee, who listened to our appeals, and were told by members of the committee, that the bill would not be taken out of the committee, because of pressure and influence exerted against it by not only outsiders, but by several members within our own ranks.

We have had several other questions that have come under our committee, and one in particular was a meeting of doctors, concerning the treatment of the indigent, held on January 24, 1933.

The meeting was attended by Dr. William H. Speer, president of the Medical Society of Delaware. Dr. Emil R. Mayerberg, president of the New Castle County Medical Society, and Dr. A. J. Strikol, Chairman of the Public Relations Committee of the New Castle County Society, Mrs. Borton and Mr. Walter Dent Smith, County Administrator of the State Emergency Relief.

Following discussion it was agreed that physicians should be reimbursed for their out-of-pocket expenses incurred when they respond to an unemployment relief case on request of the relief worker. This would include medicine, materials and supplies and a charge of 50c for the first visit, 35c for subsequent visits, this item to cover cost of transportation, etc.

I had a letter during the course of the year from Dr. Bird concerning a law regarding the fees of an undertaker and a doctor. Dr. Bird felt that the undertaker had too much advantage over the doctor, and the law should be revised to the extent that he should at least leave a certain percentage there for the doctor instead of taking it all.

DR. BIRD: May I interpolate a remark at this point? It wasn't only Dr. Bird, but many thought that, and a resolution to that effect was passed by the last House of Delegates to the effect that the legislative committee look into the feasibility and desirability of

drawing up a bill that would regulate more equitably, from the standpoint of the doctors, claims against the estates of deceased persons. I think due to lack of time and the condition of our legislature we felt it expedient to drop the subject this year. I thank you.

... It was regularly moved and seconded that the report of the Committee on Public Policy and Legislation be accepted. Carried unanimously...

PRESIDENT SPEER: We will have the report of the Committee on Publication, Dr. W. E. Bird, chairman.

SECRETARY LA MOTTE: This will be submitted in two parts. The business manager will read his own, and I have here the report of the editor, Dr. Bird.

Report of the Committee on Publication

As heretofore, we transmit herewith the report of the Publication Committee in two sections: (1) that of the Editor, and (2) that of the Business Manager.

Report of the Editor

1. We are nearing the end of the fifth year of the New Series. The economic situation of our Journal is about the same as this time last year, as the report of the Business Manager will show. There has been no considerable diminution in the number of pages printed, and the standard of our texts has been maintained.

2. All of the Transactions of this Society, and some of the county societies, have been printed. The number of original papers is slightly less than last year, and we reiterate our plea for more of these original contributions; our Delaware profession, honestly, should write more abundantly than it has been doing.

3. We have succeeded better this year in getting The Journal out on time, i. e., the 20th of each month, than formerly. This has been due to an increased cooperation on the part of our printers. We have officially signed the NRA Code and have become, thereby, members of the Periodical Publishers' Institute. "We do our Part".

4. The relations within the Committee, and with our printers, remain most cordial. We believe it only fair to advise you that our printers continue their contract with us at a price that offers them no profit; some months we doubt if they break even with their costs, yet their service is unfailingly courteous and efficient.

5. The requests for reprints and single copies continues unabated, showing that our reading public is much larger than the size of our State or its Journal would indicate. Small though our Journal is we know, from comments that come to us from many states, that it is highly regarded and reflects credit upon the Society that sponsors it. We say this in all humility, and with thanks to a loyal membership that makes such a record possible.

DR. M. A. TARUMIANZ: Five years ago at the annual meeting a group of physicians were definitely assured that they could establish the Journal of the Medical Society. At that time the society felt that Dr. Bird, Dr. LaMotte and myself should take charge of the publication as well as the Journal. I assured my colleagues at that time that I could give them all the financial support if we had the material for the scientific portion of the Journal. Dr. Bird and Dr. LaMotte have worked hard, and we have something to present to you tonight which I think will be quite a surprise in 1933, in the economic depression.

We have cash at the present time of \$3,932.06, and there is still due for the months of August and September about \$260, so there is over \$4,000 cash in the hands of your business manager. I think that is a pretty good record, especially during the last year when we made over \$600 profit. This will be printed in the Journal, Mr. President, this statement, and I don't think it is necessary to go over it now.

Report of the Business Manager

September 27, 1932 to September 25, 1933

Checking Account, September 27th, 1932..... \$398.60
Savings Account, September 27th, 1932..... 3,085.64

\$3,484.24

Receipts

Advertisements	\$1,965.66
Subscriptions, Medical Society members	336.00
Subscriptions, others	2.00
Rebate from American Medical Association	104.74
Rebate on cuts	44.60
Total receipts	\$2,453.00

Disbursements

Printing and mailing Journal	\$1,934.79
Miscellaneous postage	9.00
Stationery and supplies	66.07
Notary fees	.50
Binding Journal	12.00
Membership in Periodical Publishers Institute	10.00
Membership, American Editors Assn.	21.00
Stenographic services	61.50
Tax on checks	.84
Total disbursements	\$2,115.70
Operating balance	337.30
Interest on savings account	110.52
	\$447.82 447.82

Total September 25, 1933.....\$3,932.06

In Savings account, Wilmington Trust Company	3,732.16
In checking account, Wilmington Trust Company	199.90
Total balance	\$3,932.06

Still due from August and September 1933 advertisements, approximately..... 260.00

Summary for four years, nine months
January 1929 to September 25, 1933

Receipts

Advertisements	\$10,994.79
Subscriptions, Medical Society members	1,688.00
Subscriptions, others	222.00
Rebates from American Medical Assn.	524.39
Rebates on cuts	44.60
Sample Copies	7.80
	\$13,481.58
Interest on savings account	264.99
	\$13,746.57 \$13,746.57

Disbursements

Printing	\$8,841.71
Stationery	229.63
Postage	45.80
Notary fees	3.75
Stenographic services	286.86
Membership, Am. Editors Assn.	78.00
Membership, Periodical Pub. Inst.	10.00
Binding Journals	21.00
Tax on checks	.84
Convention expenses	150.00
Editors convention	134.92
Editorial expenses	12.00
	\$9,814.51 9,814.51
	\$3,932.06

... It was regularly moved and seconded that the report be accepted with appreciation and thanks. There were no remarks or objections and it was carried unanimously...

SECRETARY LA MOTTE: The Auditing Committee has approved the treasurer's report.

... It was regularly moved and seconded that the

treasurer's report be accepted. There were no remarks or objections and it was carried unanimously . . .

PRESIDENT SPEER: We will have the report on Medical Education, Dr. H. L. Springer, Chairman.

Report of the Committee on Medical Education

The science of medicine has developed much more rapidly than the art and the application of medicine; and the situation in the practice of medicine regarding its relation to the individual members and its relation to the public has undergone tremendous changes in the past few years. This is particularly true regarding the economic standpoint. Medical education necessarily includes a combination of all these things.

It has been very hard for the profession to realize that these changes have taken place and the medical profession itself is responsible for this difficulty in readjustment by the determined resistance on the part of many of its members. The strong effort to maintain the continuance of individualism and neglect the fact that this day has gone by, threatens to bring about a great deal of trouble in the profession. It seems to be very difficult to arouse the individual doctor to the importance of legislative activity as regards the health of the public and the protection of the doctor himself against the increasing in-roads of cults, quacks, corporation practice, and many other sub-standard practitioners.

Charlatanism and quackery have advanced side by side with the development of medical service from the beginning of time, but organized group opposition to the regular practice of medicine has increased very greatly during the last fifteen years. It has attained such speed that it has become dangerous to the practice of medicine in all of its aspects.

Just where we are heading at this time, it is impossible to tell. It seems to be likely that we are going to be dominated by governmental influence, particularly because of our failure to take active steps to keep up with the remarkable development of public consciousness of the great importance of community as well as individual health. There is no doubt about the fact that the medical profession has to assume a great responsibility for the growth of the various cults and the ease with which many sub-standard practitioners can enter the practice of medicine through illegal channels. And that state boards must become more severe in their examination of applicants who desire to practice medicine. This careful scrutiny should be applied more seriously toward the personal qualifications of the applicant than it is possible to do at the present time, and questions of sympathy for the applicant should be entirely put aside.

A great many applicants undoubtedly are qualified as far as pre-medical and medical education are concerned and it is very difficult, under the existing Medical Practice Act to refuse a man a license to practice medicine if he has the proper medical education,—but this should be the minor part of the State Board's business. These boards should not lose sight of the fact that their primary reason for existence is not the protection of practitioners already established, even though this is of secondary importance; but it is to protect the public against unqualified doctors and the most important qualifications of a doctor are his personal characteristics. This would necessitate of course, giving a medical examining board considerable authority which, at times might be abused, but I think this objection is theoretical. There is no question about the fact however, that the medical examining board has a great responsibility in passing upon the qualifications of an applicant to practice medicine in its community, and medical practice acts should be so worded as to give these boards considerable leeway in determining the personal qualifications.

In Delaware, as well as in other states, there are an enormous number of inquiries constantly being made to the office of the Secretary of the Medical Council concerning the qualifications required to practice med-

icine and surgery in Delaware and those inquiries from the cults are increasing all the time. A few statistics at this point might not be amiss, since it is not likely that many physicians realize the competition with which they have to contend.

There are about 150,000 physicians in the United States, most of whom are educationally well qualified—over 100,000 of them are members of the American Medical Association. There are about 40,000 other individuals of lesser education who loudly advertise themselves as competent to treat the sick. About 8,000 Osteopaths take \$42,000,000 annually for their services and about 20,000 chiropractors take about \$63,000,000. Add to this about 3,000 naturopaths and 10,000 Christian Scientists and other religious healers who all told, take about \$130,000,000 from a gullible public that has been attracted by their advertising and promises of cures and it is not hard to realize the danger the regular medical profession is in and the necessity which is so obvious that something be done to correct this state of affairs.

Our conservative efforts and tradition restrain us greatly from a much needed proper group advertising by honest and conscientious doctors and there is a great opportunity along this line to deal a death blow to this army of irregular practitioners by broadcasting the real values of scientific knowledge and its importance to the general public.

The American Medical Association has some statistics which justify them in stating that there are about 25,000 more doctors in this country than are needed and the Med. Schools are still turning out between four and five thousand doctors a year. The economic side of this and its effect on the individual doctor is very depressing, but, of course, has no place in this report.

The question of over-crowding the profession is one which affects other countries as well as ours and there are a great many factors concerned, which will have to be taken into consideration aside from the limiting of the number of students who enter medical schools. There is of course, a limit in this country as to the number taken by the various medical schools as a result of which a large number have gone abroad to take their training in foreign countries with the intention of coming back to this country to practice. This, raises a question which is a very important one for all examining boards.

At the last meeting of the Council on Medical Education and Hospitals of the A. M. A., the Association of Medical Colleges, Federation of State Boards, National Board of Medical Examiners, and the New York State Board of Regents, a resolution was passed requesting all state examining boards to adopt the following recommendation:

1. "That no American student matriculating in a European medical school subsequent to the academic year 1932-1933 will be admitted to any state medical licensing examination or to the examination of the National Board of Medical Examiners, who does not, before beginning such medical study, secure from a state board of medical examiners or other competent state authority, a certificate endorsed by the Association of American Medical Colleges, or the Council on Medical Education and Hospitals of the American Medical Association, showing that he has met the premedical educational requirements prescribed by the aforementioned associations.

2. That no student, either American or European, matriculating in a European medical school subsequent to the academic year 1932-1933 will be admitted to any state medical licensing examination, or to the examination of the National Board of Medical Examiners, who does not present satisfactory evidence of premedical education equivalent to the requirements of the Association of American Medical Colleges, and the Council on Medical Education and Hospitals of the American Medical Association, and graduation from a European medical school after a medical course of at least four academic years, and either:

(a) Obtain a license to practice medicine in the

country in which the medical school from which he is graduated is located, or

(b) Receive the degree of Doctor of Medicine after not less than one year's resident study in an American or Canadian medical school approved by the Federation of State Medical Boards of the United States, the Association of American Medical Colleges, and the Council on Medical Education and Hospitals of the American Medical Association.

The Medical Council adopted this regulation at its meeting in June, but they went further and passed a resolution in which it would conform to its past procedure, namely, that the Medical Council of Delaware cannot accept as a candidate any applicant who has graduated from a foreign medical school. Applicants will be accepted from Canada, either for examination or by reciprocity, if they fulfill the usual requirements. This stand was taken because the State Boards of Delaware have not any funds or means of investigating the credentials of such applicants. This tendency of American medical students to seek training in Europe is increasing, and with the number of other foreign graduates who are applying in increasing numbers each year, the responsibilities of state boards are becoming greater.

The United States now has more physicians in proportion to its population than any other country in the world and it is not only a question of the over-supply of doctors but the more serious thing will happen, namely, the possible lowering of the standards of the profession by great competition between doctors in order that they may live.

Already, one can see the tendency on the part of many physicians who would be considered as having the highest professional qualifications consulting with irregulars for economic reasons, with the natural result that it is impossible for them to take sides against these irregulars when questions of Legislation affecting them arise.

The question of control of specialists is one in which no progress has been made in Delaware during the past year; it is a very difficult problem. It is one, however, that should be given thoughtful consideration, since the time is soon coming when it will be necessary to amend the Medical Practice Act in order to protect the public against the practitioner whose only qualification of the specialty which he claims is his statement that he is a specialist;

There is another difficulty confronting the profession which is apparently not amenable to treatment by the Medical Practice Act, but which is a very unfair procedure regarding the rank and file of the profession, and that is the practice of large corporations supplying free treatment of all kinds to any employee. This not only works an economic hardship on the practitioner but in many instances the character of service is not and cannot be as good as it should be. In other words, it is another thing which has a tendency to the lowering of standards in the profession. The other form of corporation practice which has sprung up in which groups of medical men band together and supply medical treatment at very low rates, has the same objections.

During the year that has elapsed since the last meeting of this Society, the examinations by the State Board have been held as usual in December and June. During that time 18 applicants applied for examination before the Board representing the Medical Society of Delaware. Of this number, four failed. These were osteopaths. One of these osteopaths failed at both examinations and, incidentally, a third time, in June of 1932. Of this number, two osteopaths passed the June examination.

At these two meetings of the Board, there were three Homeopaths appearing for examination, and they all passed. By reciprocity, there were twelve from other states as follows: Pennsylvania, 5; Maryland, 2; New Jersey, 1; Connecticut, 1; West Virginia, 1; Minnesota, 1; National Board, 1.

The Examining Boards and the Medical Council might be criticised for apparently having accepted such a high percentage of men for license, but while they have been liberal as possible, yet no man was accepted

except after careful consideration by the Board. Each man's credentials were carefully scrutinized by each member of the Board, and the papers were marked carefully. Every paper was examined under number only and not by name, and their markings were surprisingly consistent in every subject.

There were a large number of inquiries from various parts of the world for information regarding the necessary qualifications. Many of these did not ask for the necessary papers to fill out.

The secretary of the Medical Council has been able to establish reciprocity agreements with all states in the Union excepting four, and those states will not accept an applicant by endorsement from any state.

The work of the State Medical Examining Boards is increasing each year, and is becoming increasingly difficult. The time has passed when a doctor, like a national government, can exist as an individual. The profession is beset by so many forces and dangers that threaten its very existence that only a united effort to maintain its high standards will save it from falling from its high pedestal. All personal feelings must be sacrificed for the good of the profession, and individualism put aside for what is right! Then the attacks of the army of cults and other substandard practitioners can be overcome, and their honorable calling assume its ancient heritage, and protect the health of humanity.

PRESIDENT SPEER: Are there any remarks on the report of the Committee on Medical Education?

... It was regularly moved and seconded that the report be accepted. No remarks or objections, and motion was carried unanimously.

PRESIDENT SPEER: We will have the report of the Committee on Hospitals, Dr. L. B. Flinn, Chairman.

DR. L. B. FLINN: I would like to make one personal remark before submitting the written report. It is merely that I was personally surprised and gratified at what I discovered, I think, to be of real value in this annual inspection of hospitals by this committee. We were all impressed with the effort of all the institutions to cooperate to the fullest extent, and each year, from the preceding reports and from this one, it can be seen that each institution is certainly trying to do its utmost. Incidentally, if anybody wants a day's work, inspect all the hospitals in New Castle County in one day, and then take a turn at Kent and Sussex.

Report of the Committee on Hospitals

The committee has had three meetings at which there was 100% attendance. The first meeting was held in Wilmington on August 24, when plans were made for the two subsequent meetings, using the 1932 Hospital Committee report as a guide. The second meeting consisted of an inspection of the hospitals in Kent and Sussex Counties on August 29. The third meeting consisted of an inspection of the hospitals in New Castle County on September 1. Edgewood Sanatorium and a number of small private hospitals and nursing homes were not visited. The committee was courteously received by all the institutions and shown every consideration and attention during the inspection. The committee was impressed with the fact that each institution is trying to cooperate to the fullest extent. A detailed report of each hospital is appended and finally the committee's conclusion of the entire inspection.

Beebe Hospital, located at Lewes, Delaware. Bed capacity 60. This is an up-to-date hospital in good condition. There is a splendid record system. One resident physician in winter and two in summer.

1932 Recommendations complied with:

1. The much needed fire escape has been ordered.

Other improvements since 1932:

1. A new sterilizer for operating room.

2. Further painting and re-decorating has improved the general appearance and attractiveness of the hospital.

3. The obstetrics department and nursery have been made particularly attractive.

1933 Recommendations:

1. The present kitchen is dark and inadequate and should be enlarged.
 2. A dietitian should be employed.
 3. The laboratory needs enlarging; more equipment is needed. The committee understands a technician is now employed. Plans for extending the laboratory have been made.
 4. A bed pan sterilizer is badly needed.
 5. A Physiotherapy Department should be instituted.
- Brandywine Sanatorium*, Marshallton, Del. Bed capacity 81, originally for 40. The sanatorium is to be congratulated on it's steady improvement. A new children's building will be ready for occupancy on October 15. A resident physician and also a graduate nurse are now already on duty. This physician also acts as a laboratory technician—fulfilling one suggestion of last year's Hospital Committee.

Other improvements since 1932:

1. Completion of building for up patients.
2. The pneumothorax room has been moved next to the x-ray room.
3. Completion of four new screened porches, each with a capacity for seven beds, on the front of the main building.

1933 Recommendations:

1. Modernize and double the number of lavatory toilet facilities and utility rooms in the main building. The present ones are in a deplorable condition.
2. Enlargement of both kitchen and laundry.
3. Increase number of private rooms and arrange private bath and toilet facilities separate from those used by ward patients.
4. Installation of at least two diet kitchens.
5. Secure funds for accommodation of all State applicants; conforming with the standard of the American Sanatorium Association. At present there is a waiting list of 54; the first on the list is an active case who has been waiting 11 months for admission.

Delaware Colony for Feeble Minded, located at Stockley, Del. Present census 315. The facilities of this institution have greatly improved again this year. The greatest improvement being the completion of the new infirmary. The visiting physician is in daily attendance. The equipment is modern and very well arranged. The management is perfectly aware of the needs of the institution and has applied for funds for various purposes to the NRA Board.

1933 Recommendations:

1. Installation of glass doors in one wing of the infirmary for isolation of contagious diseases.
2. Building of two cottages for trainable cases.
3. Additional teachers.
4. Improved water and sewage disposal systems.

Delaware Hospital, located in Wilmington, Del. Bed capacity 200. This hospital has made gratifying improvement each year. The committee was impressed with the fact that the management is bending every effort to make the best of a physical plant which is ultimately to be replaced by entirely new buildings.

1932 Recommendations complied with:

1. The management has continued to make the hospital attractive by frequent painting and re-decorating with particular attention to draperies and floor coverings.

2. An allergy clinic has been installed.
3. A metabolic clinic has just been opened.
4. The tumor clinic, financed by the State, has its headquarters in the Pathological Department of this hospital.

Other improvements since 1932:

1. Infants in the nursing or maternity ward are cared for by nurses on duty nowhere else under the direction of a special graduate nurse. The committee feels that this is a most desirable arrangement.

2. A new preparation and sterilizing room for dressings has been placed on the maternity floor.

3. A gynecology examining room has been installed adjacent to the woman's ward.

4. Location of basal metabolic room has been changed.

5. A new linen chute has been placed on the children's ward.

1933 Recommendations:

Several suggestions of previous committee reports relative to major changes such as moving the diet kitchen and relieving the over-crowded condition by establishing more ward beds, have not been complied with; presumably because of the contemplated new building. However, the committee feels that the following changes are urgently needed:

1. An immediate re-arrangement of the surgical preparation room, dental clinic and autopsy room. The latter is in a very bad location and is in a deplorable condition. The committee feels very strongly about this and if other more elaborate arrangements are impossible, certainly a temporary autopsy room could be installed just south of the newly extended accident room with very little expense to the hospital.

2. Enlargement of the over-flow operating room.

3. A fire escape is still badly needed for the children's ward.

4. A proper labor room is needed which can be used for an accessory delivery room.

5. A treatment room for the children's ward is badly needed; at present it is necessary to give intravenous treatments in a combined bath room, toilet and treatment room.

6. An examining room for private out patients.

Delaware State Hospital, Farnhurst, Del. The general condition of this hospital is excellent as found in the last year's inspection and in addition to the facilities for diagnosis and treatment of mental diseases, there is complete, modern and excellent equipment such as should be found in an up-to-date general hospital; including laboratory, dietetics department, physiotherapy department, x-ray and surgical department. The hospital, however, is still over-crowded, having a capacity to house 700 patients with an average census of 900. Some of this over-crowding will soon be relieved by the acquirement of the New Castle Co. Hospital Building. However, a better equipped receiving ward is needed and in addition a special building for children suffering from mental diseases. Many children are now found on crowded wards with adults.

St. Francis Hospital, Wilmington, Del. Bed capacity, 75. This is the smallest of the Wilmington hospitals. The management is still trying to improve the institution and follow the suggestions of the committee. Each year shows a gratifying advance. The records were found in good condition.

1932 Recommendations complied with:

1. The nurses' home has been enlarged, improved and made very attractive.

Other improvements since 1932:

1. A new gas machine for operating room.
2. A new light has just been installed in the operating room.

3. An up-to-date splint closet has been installed.

4. One new frigidare has been installed.

5. New outside laundry chute has been installed.

6. Enlarged and improved nurses' home.

1933 Recommendations:

1. New floor covering, inside painting and new draperies are urgently needed to make the hospital more attractive.

2. A larger number of ward beds are badly needed.

3. The laboratory is in charge of a well trained technician but the facilities are small and very cramped; these should be enlarged.

4. There should be a room reserved for basal metabolic determinations; at present these are made in the open ward.

5. A medical stenographer is needed.

6. A social service department is needed.

7. A diet kitchen separate from the main kitchen.

8. The laundry facilities are inadequate.

9. There should be a separate dining room for unskilled; at present they eat in the kitchen.

10. An autopsy room is needed.

11. A new nurses' dining room is needed.

12. An obstetrics department separate from the rest of the hospital should be installed.

Homeopathic Hospital Association, Wilmington, Del. Bed capacity 165. This hospital is excellently appointed and equipped in its comparatively new buildings. The committee indorses the report of last year in which the hospital was congratulated on its physical equipment and earnest effort to keep all the departments on a progressive basis. The treatment room on each floor continues to prove its usefulness. The case records were found in good condition and excellently filed and indexed.

1932 Recommendations complied with:

1. The out-patient department has been further enlarged, newly painted and is now very attractive.

2. A social service department has been established and is doing excellent work.

Other improvements since 1932:

1. A dental clinic room has been equipped and a dental clinic is in operation under the direction of the dental staff.

2. A complete new and modern laboratory with three full-time technicians. This is an addition of one technician over that previously employed.

3. A Drinker respirator has been procured which is available for use by other hospitals in Wilmington.

1933 Recommendations:

1. A continuance of the present policy of improving various departments of the institution with particular emphasis on enlarging the activities of the social service department.

2. A resident pathologist is needed or at least a more intimate contact with the present consulting pathologist.

3. A physiotherapy department needs developing.

Kent General Hospital, Dover, Del. Bed capacity 39. This is a comparatively new hospital with apparently insufficient means for fulfilling the desires of the Board, or the recommendations of the Hospital Committee. We hope that funds may be secured in the immediate future for the fulfillment of the following recommendations; all of which were made by the committee last year:

1. Much inside painting and re-decorating is needed.

2. Additional fire escape.

3. The employment of a dietitian and the establishment of a diet kitchen.

4. Immediate installation of running water in delivery room.

5. Re-arrangement of delivery room and a continuous bath room. The latter might be salvaged by the Delaware State Hospital.

6. Enlarge and further equip the laboratory.

7. Establishment of a physiotherapy department which will be of special use in the orthopedic clinic, which is now functioning.

1932 Recommendations complied with:

A resident physician who also acts as laboratory technician, has been employed.

2. A portable x-ray has been ordered.

3. Records reported good last year have improved again. Largely through aid of Res. Phy.

1933 Recommendations:

1. An autopsy room is needed.

2. More private rooms for obstetric cases are needed.

Marshall Hospital, Milford, Del. Bed capacity, 30. This is a small and essentially private hospital. It is difficult to criticize this institution on the same basis as the larger ones. The records though not complete are accessible. The staff is bending every effort to do excellent work and several small improvements have been made in the equipment of the hospital during the past year.

Milford Emergency Hospital, Milford, Del. Bed capacity, 35. This hospital is certainly making the best

out of an old building. Every effort is made to carry out the suggestions of the Hospital Committee. There is constant improvement and at the present time there is no debt.

1932 Recommendations complied with:

1. Plans have been made for a fire escape to the third floor but it has not been installed yet.

Other improvements since 1932:

1. New linoleum has been laid upon all the floors.

2. New painting throughout building, inside and outside.

3. New electric call service.

4. The laboratory is excellently equipped and a thoroughly trained full-time technician is in charge. The committee was particularly impressed with this improvement.

5. An ice air cooling machine has been installed in the operating room.

6. A new electric refrigerator has been installed.

7. The nurses' home has been enlarged and better equipped.

8. New linen closet has been installed on maternity floor.

1933 Recommendations:

1. Installation of fire escape, for which plans have been made.

2. Running water in the accident and receiving wards.

3. Bed pan sterilizer.

4. Portable x-ray.

5. Enlargement of nursery.

6. Autopsy room.

7. Physiotherapy department, badly needed.

Wilmington General Hospital, Wilmington, Del. Bed capacity 110. This is a modern building with excellent facilities. The records are in good condition. The hospital does, however, need more ward beds. It is most unfortunate for such a hospital to have to place colored and white adults in the same ward.

1933 Recommendations:

1. The children's ward is small and difficult to ventilate. A treatment room for this ward is badly needed.

2. At the present time the same room on the first floor is used for gynecologic and urologic examinations and treatment; two separate rooms are suggested.

3. A delivery room separate from the operating room is urgently needed.

4. A nurse to take care of the nursery who is not on duty elsewhere.

5. At the present time the hospital has no splint room.

6. Increase ward beds as indicated above.

7. It would seem that a hospital with a bed capacity of 110 would have need of more than one full-time technician, even with a half-time pathologist. The committee does not indorse the present practice of entrusting part of routine blood counting to student nurses.

The Contagious Unit continues to leave little to be desired for equipment to treat contagious diseases. The hospital as a whole is to be congratulated on its general good condition and continuous effort to make improvements as they become necessary.

Finally the committee finds that a great disproportion exists between the amount of public funds at the disposal of the State Hospital at Farnhurst and the Delaware Colony for Feeble Minded at Stockley (appropriated by the State) as compared with that available for the general hospitals throughout the state (appropriated by the counties). It is not to be implied that the two above mentioned institutions receive too much; the detailed inspection report above denies this insinuation. It is also realized that none of the general hospitals are city or state institutions; they do, however, care for the state's indigent sick. Why, then must the tax payers of the state spend for the care of their insane and feeble minded perhaps three times more than they do for the care of their sick in the general hospitals? The committee therefore, recommends that a representative of the board of each institution con-

cerned, meet and confer with the Governor or some other responsible state representative. Such action is particularly opportune at this time when a special legislature is to be called relative to the disposal of NRA funds.

The final conclusion of the committee is that this report, if adopted by the Society, be sent to the Board of each institution inspected as well as to the Governor of the state.

... It was regularly moved and seconded that the report be accepted. No remarks or objections, and the motion was carried unanimously.

PRESIDENT SPEER: We will have the report of the Committee on Necrology, Dr. J. W. Bastian, chairman.

Report of the Committee on Necrology

Nothing is more touching than the death of the young and the strong; but when the duties of life have been nobly done, when the sun is rapidly reaching the horizon, when the purple twilight falls upon the past, the present and the future, when memory with dim eyes begins to spell the blurred and faded records of vanished days, then death comes like a strain of music, the day has been long, the road weary, and the traveler gladly stops at the welcome inn, from which no guest has ever returned.

During the past year we have lost two members by death, both of whom had passed the crest of the mountain and were rapidly approaching the shadow at the base.

Dr. William Wertenbaker, aged 58, died March 24, 1933, in the Union Memorial Hospital Baltimore, following an operation for carcinoma of the splenic flexure.

He was born in Charlottesville, and graduated from the University of Virginia in 1901. He then began practicing general medicine in New Castle, Delaware, about 1902, where he remained eleven years, in which time he developed a very large practice.

He then quit general practice and did post-graduate work in obstetrics and gynecology in Baltimore and New York for about one year, after which he located in Wilmington and practiced his chosen specialty until a few weeks before his death.

Dr. Wertenbaker took a great interest in the advancement of our profession. He was a past President of the New Castle County Medical Society, and had been a delegate and served on important committees of the State Society several times. He contributed a number of technical papers devoted to gynecology and obstetrics, and served several years as one of the examiners of the State Board. He was a former member of the obstetrical and gynecological staff of the Delaware Hospital, was a member of the Medical Board of the Wilmington General Hospital, obstetrician and gynecologist to that hospital and to St. Francis Hospital, and consulting gynecologist of the Delaware State Hospital.

Dr. James S. Cobb, aged 68, died at his home in Clayton September 21, 1933. He was born in Wilmington, N. C., and was graduated from Georgetown University (D. C.) in 1893. He began a general practice in Odessa, Delaware, and from there moved to Clayton, where he developed a very large practice.

He was a member of the staff of the Kent General Hospital, and a member of the Kent County and the State Medical Societies.

While in recent years he was not active in our organization, many of us knew him as a faithful and conscientious physician who will be greatly missed in his community.

Be it resolved: that the Medical Society of Delaware through the death of Drs. Wertenbaker and Cobb has lost two of its most active and devoted members and the State of Delaware, two citizens whose places will be hard to refill.

DR. J. W. BASTIAN: There was another physician who died, Dr. Anderson, of Dover, who was not a member, an oldtime homeopath, a lovable, old man, and a great many of you knew him. He died the same day

that Dr. Cobb died. While he was not a member of our Society, I feel it would be very appropriate to say something about Dr. Anderson. I think probably our president knows more about Dr. Anderson than the rest of us, because, while Dr. Speer doesn't remember the details of the event, I understand Dr. Anderson ushered Dr. Speer into this world.

DR. D. W. LEWIS: I believe there should be a correction in Dr. Bastian's paper relative to Dr. Cobb's practice. He practiced in Clayton nearly all his life, and his main location was in Clayton; and another slight correction: that he died at the Clayton Hospital.

DR. BASTIAN: All the information I could get was from the newspapers. I knew him only slightly, and that was all the information I could get.

... Motion regularly made and seconded to receive the report with corrections. Carried unanimously.

DR. BIRD: I move that this Society stand in silence for one minute in honor of our dead, as is our custom.

... Society stood silently for one minute.

DR. A. J. STRIKOL: I move that we send a copy of this resolution to the family of each of the doctors.

PRESIDENT SPEER: It is regularly moved and seconded that a copy of the resolution as amended be sent to the families of the deceased doctors. Are there any remarks or objections? The motion is carried.

We will have the report of the Advisory Committee, Woman's Auxiliary.

Report of Advisory Committee Woman's Auxiliary

DR. T. H. DAVIES: There is nothing to report except progress, and the honor conferred upon the Society by the election of Mrs. R. W. Tomlinson, our State president, to the presidency of the national organization, which I think was a great honor.

PRESIDENT SPEER: We will have the report of the Committee on Cancer.

Report of the Committee on Cancer

DR. G. C. McELPATRICK: The Cancer Committee had very little to do this year on account of the activities of the Delaware Committee of the American Society for the Control of Cancer. No doubt we will have a more detailed report from Dr. Springer or Dr. Gay, the director. They have carried this problem all through the state, have organized tumor clinics, and there was nothing for our committee to do except give them our moral support.

PRESIDENT SPEER: We will have the report of the Committee on Syphilis, Dr. B. S. Vallett, Chairman.

Report of the Committee on Syphilis

The prevention, early diagnosis and satisfactory treatment of syphilis still remains one of our major problems. An impression of its magnitude may be glimpsed when one considers that since 1920, 35,000 more cases of syphilis have been reported than of scarlet fever; 79,000 more than of all the forms of tuberculosis.

Your committee wishes to emphasize the importance of early diagnosis. Every suspicious sore should be cleansed with physiological saline only, until a dark field study has been made. A dark field apparatus in each of our hospitals would simplify accessibility to every physician in the state.

Today it is quite apparent that few syphilitics can afford to pay for treatment. There is a general impression and also statistical evidence to show that more cases are going to the clinic; however, the most vital impression is that of untreated, poorly treated, and relapsing syphilis. We have been giving too little of the arsenicals and too much bismuth. In France recently an upward fluctuation in the incidence of syphilis has been directly attributable to the substitution of bismuth for the arsphenamines. We also have failed to individualize our syphilitic. This is a good time to teach him the necessity of continuous treatment. In this way will we be able to combat relapsing syphilis. In our periodic examinations of the patient the clinical exam-

ination is by far the most important. Consequently, much less importance should be attached to the serologic tests.

In spite of our clinics and the impression that more cases are seeking them out, the fact remains that the private physician is still seeing the most syphilis. This being true, we believe that were the private practitioner to avail himself of state-provided arsphenamine for his indigent patient that a greater fundamental benefit would accrue both to the patient and to the ultimate control of the disease. The more fully responsibility is accepted by us the more permanent will be the results sought.

In the prevention of this disease we recommend that the State Medical Society authorize broadcasting by radio as a part of its educational program in the control of venereal diseases. In Massachusetts, where this approach was used, much favorable comment and not a single complaint was heard.

It is further recommended that a plan be evolved whereby a social service be made available to the private physician.

Finally, a plea is made for physicians to assume a greater burden of charity work for their cases of syphilis, because as long as syphilis exists the private physician will ever share the greater responsibility in its control.

... Motion was regularly made and seconded to accept the report of the Committee on Syphilis. No remarks or objections, and the motion was carried unanimously ...

PRESIDENT SPEER: We will have the report of the Committee on Library, Dr. E. R. Mayerberg, Chairman.

Report of the Committee on Library

The committee has nothing to report except that the books that were formerly housed in the Delaware State Hospital have been transferred to this building, the Delaware Academy of Medicine. I would like to call to the attention of the officers of the organization that the Delaware Academy of Medicine has authorized the addition of representatives of this organization on their executive committee. So far no representative has been named. That was done to have a tie between the State Society and the Delaware Academy of Medicine. Your committee suggests that appointment be made this year.

DR. BIRD: In that connection I think at the Dover meeting three years ago a tender of such an appointment was made and accepted by the House of Delegates, and Dr. Tarumianz informs me he was the original incumbent. That appointment was to be made by the president.

PRESIDENT SPEER: I will leave that, of course, to the incoming president to appoint someone.

DR. MAYERBERG: I failed to say that one of the requirements for this appointment is that such a man must also be a member of the Delaware Academy of Medicine. A man can't be appointed who is not a member of the other organization.

PRESIDENT SPEER: We will have the report of the Committee on Criminologic Institutes, Dr. M. A. Tarumianz, Chairman.

Report of the Committee on Criminology

At the last annual meeting, the Committee on Criminology presented a complete report on crime in general, with concrete recommendations in regard to the criminals in this State. These recommendations were as follows:

"The Committee feels that the medical profession of Delaware should be more interested in the prevention of crime rather than in the treatment. Therefore, it recommends to have a closer co-operation between the public educational system, judicial system, bar association, organized social workers, and the medical profession. To find better methods for rehabilitation of delinquent children. To establish better environment for the vast majority of children who are in unhealthy and inhuman environment. To have adequate forces in or-

ganization for prevention of crime, for studying each individual delinquent child. To authorize the Committee on Criminology to co-operate with the "Delaware White House Conference" and "State Mental Hygiene Clinic Society" in finding better methods for prevention of delinquency.

As to care and treatment of criminals in this state, the committee finds that in the last few years the state courts have endeavored more and more to give each criminal a fair trial. Many doubtful cases have been referred to the Mental Hygiene Clinic and state psychiatrist, to have complete examination and prolonged observation before presenting the cases. The office of the attorney general has been very co-operative in this procedure. The Committee hopes that the courts of the State of Delaware will take the same stand as the courts of many states, especially the State of New York. That no case of felony should be tried in the courts unless there is a complete social, psychological and psychiatric report.

The Committee recommends to request the Legislature to appropriate sufficient funds to survey this state in regard to delinquency and present definite plans for the prevention of delinquency.

The Committee recommends to request the Bar Association of Delaware to appoint a committee of three, representing each county of the state, who jointly with the committee from this society will continue the efforts in studying the question of crime."

This report was received and filed by the Society. Nothing has been done toward carrying out any of the recommendations. The Committee now feels that unless practical use is made of these recommendations, it would be far from profitable to spend more time making others. We can only ask you, if you feel that it is feasible, that an effort be made to carry out such recommendations as have already been made.

The section on Forensic Psychiatry and Conduct Disorders of the American Psychiatric Association, of which the chairman of your committee is a member, is endeavoring to have closer co-operation between the members of the Medical Association and the Bar Association, for creating new laws for the prevention of crime.

... Motion regularly made and seconded that this report be accepted. No remarks or objections, and motion carried unanimously ...

PRESIDENT SPEER: We will have the report of the Committee on Tuberculosis, Dr. M. I. Samuel, Chairman.

Report of Committee on Tuberculosis

The Special Committee on Tuberculosis appointed by the President following a meeting of the House of Delegates on January 23rd, begs to report that the chairman called a meeting for Sunday morning, January 29th, at which all members were present except Dr. Prickett and Dr. McDaniel. At this meeting the following motions were made and carried:

First: That the secretary of the State Board of Health furnish to each representative and senator in the legislature the number of tuberculosis patients on the waiting list to be admitted to the Brandywine Sanatorium in their respective districts. The names of these patients to be furnished each representative and senator if they so desire; also send a copy of the survey entitled "Tuberculosis in Delaware" by the Public Health Committee of the Chamber of Commerce to each senator and representative.

Two: To draft a bill by the lawyer of the Anti-Tuberculosis Society, Chamber of Commerce, and the Medical Society of Delaware, to work together to have the Brandywine Sanatorium in charge of a Board of Trustees, or Board of Governors. This Board of Trustees, or Board of Governors, to be composed of the following:

- (a) Four doctors and four laymen:
 - (1) One doctor and one laymen from Kent County.

- (2) One doctor and one laymen from Sussex County.
- (3) Two doctors and two laymen from New Castle County.

Three: That the appropriations asked for by the Brandywine Sanatorium, for the next two years, be itemized; in other words, that the construction be separated from the maintenance.

Fourth: We also recommend that the public be informed by pamphlet, newspaper, or radio that this climate is not unsuitable to the treatment of patients suffering from tuberculosis.

The chairman carried out these recommendations, and consulted Mr. Morford, who drew up two bills to be presented to the legislature, but before doing so attended a number of meetings with the Public Health Committee of the Chamber of Commerce, and the Anti-Tuberculosis Society. As the result of the investigation by these special committees a resolution was passed that a bill be prepared by the attorneys which would provide an appropriation for \$460,000 for new construction and maintenance at Brandywine and Edgewood Sanatoriums.

Newspaper publicity. There appeared in the Sunday Star, January 29th, an article, a column and a half, setting forth that the State Medical Society saw the necessity for prompt legislative action regarding the tuberculosis situation in Delaware. There also appeared in the Sunday Star an editorial stating the efforts being made by the Medical Society of Delaware for prompt legislation concerning the dangerous tuberculosis situation that existed.

A fifteen minute broadcast over WDEL was given by the chairman.

The committee was represented on the Medical Advisory Committee of the Anti-Tuberculosis Society, which is concerned with the tuberculin testing and early case findings, which will be presented tomorrow.

The committee was represented at a special hearing before the Industrial Survey Commission in Dover, where the recommendation was made to the Federal Advisory Board that an appropriation of \$560,000 be granted to the Brandywine and Edgewood Sanatoriums, for the purposes set forth in the Senate bill 127 which was approved at the last session of the Legislature, but reduced the amount asked for by \$100,000. The committee feels that at the coming special session of the legislature each physician should again contact his senator and representative, urging the passage of this particular item of \$560,000 for new construction at Brandywine and Edgewood.

Regarding the bill to create a Board of Trustees for Brandywine Sanatorium, your Committee feels this bill should be re-introduced at the next session of the Law.

... It was regularly moved and seconded that this report be accepted. No remarks or objections, and motion was carried unanimously.

PRESIDENT SPEER: We will have the report of the delegate to the American Medical Association, Dr. C. E. Wagner.

Report of Delegate to A. M. A.

Owing to the inability of Dr. James Beebe to attend it was my privilege to serve the Medical Society of Delaware as its alternate delegate at the Convention of the American Medical Association held at Milwaukee, from June 12th to 16th.

The House of Delegates convened in the Grand Ball Room of the Schroeder Hotel. The first meeting was called to order on Monday morning, June 12th, at ten o'clock by the Speaker, Dr. F. C. Warnshuis. Following a few preliminaries, addresses were then made by Dr. Warnshuis, President Edward H. Cary, and President-Elect Dean Lewis.

Dr. Cary reviewed the year's accomplishments, calling attention to the successful issues attained: (1) the right of the physician to use his own judgment in prescribing alcoholic liquors; (2) the defeat of Sheppard-

Townerism and the substitution of state and local agencies for federal bureaucracy; (3) the steps taken in further control of narcotics through state legislation; (4) the activities of the legislative committee in regard to veterans' care, which, without doubt, exerted marked influence in the recent executive orders affecting the hospitalization of cases having no service origin; (5) endorsing the Minority Report of the Committee on the Costs of Medical Care and calling attention to the soundness of the principles enunciated; (6) the need for unity of spirit and professional desire in our county and state societies as a necessary corollary to successful action through our National Association.

Dr. Lewis spoke of the attitude the medical profession should take regarding the care of veterans. He touched on the cost of medical care and emphasized an important phase sometimes overlooked in the high cost of hospital construction, which greatly increases the cost without increased benefits to the patient. He also stated that merging of hospitals in many communities would lead to better service to all parties concerned.

Report of the Reference Committee on Medical Economics

The committee recommended that the study of contract practice be continued and that the action of county societies in dealing with these problems be based on the recommendations of the Judicial Council. It stated: "Contract practice per se is not unethical. However, certain features or conditions if present make a contract unethical, among which are: (1) when there is a solicitation of patients, directly or indirectly; (2) when there is underbidding to secure contracts; (3) when the compensation is inadequate to assure good medical service; (4) when there is interference with reasonable competition in a community; (5) when free choice of a physician is prevented; (6) when the conditions of his employment make it impossible to render adequate service to his patients; (7) when the contract because of any of its provisions or practical results is contrary to sound public policy.

This and other sections of the report of the committee were adopted.

Report of the Reference Committee on Legislation and Public Relations

It recommended that the House of Delegates adopt the resolution proposed by Dr. Macatee, of the District of Columbia, namely:

Resolved. That the House of Delegates of the American Medical Association endorse the Minority Report of the Committee on the Costs of Medical Care as expressive, in principle, of the collective opinion of the medical profession.

It also recommended the adoption of a resolution that the American Medical Association commends the efforts of the President to preserve to all veterans suffering from service connected disabilities all medical and hospital benefits necessary to their relief.

The recommendations of the committee were adopted.

The Reference Committee on Hygiene and Public Health recommended the adoption of a resolution, submitted by Dr. E. D. Plass, of Iowa, relating to birth control.

It was moved and seconded that the report be adopted. A discussion followed during which Dr. E. M. Pallette, of California, moved that the motion be laid on the table. This was done by a vote of 66 to 46 in executive session on Tuesday, June 13th.

A message of sympathy and best wishes was sent to Dr. William H. Welch, of Baltimore, on Thursday afternoon, June 15th.

The election of officers was then held.

Dr. E. B. Heckel, Pittsburgh; Dr. Harvey Cushing, Boston; and Dr. Walter L. Biering, Des Moines, Iowa, were nominated for president and received respectively, 42, 41, and 74 votes on the first ballot. Under the rules, the name of Dr. Cushing was dropped, and Dr. Biering was elected on the second ballot.

Dr. John H. Musser, New Orleans, was elected vice-president; Dr. Olin West, Chicago, was re-elected secretary; and Dr. Herman L. Kretschmer, Chicago, was elected treasurer, in each case without opposition.

Dr. F. C. Warnshuis was again elected speaker of the House of Delegates by a unanimous vote, and Dr. F. E. Sondern, New York, was elected vice-speaker of the House of Delegates.

Dr. Austin A. Hayden, Chicago, and Dr. C. B. Wright, Minneapolis, were elected trustees.

For the place of holding the 1934 Convention, invitations were extended by Cleveland, Washington, D. C., and Atlantic City. Cleveland was the choice upon the second ballot.

For the complete minutes of the House of Delegates I would refer you to the Journal of the A.M.A., for June 24th and July 1, 1933.

In conclusion I wish to express my appreciation for the honor of serving the Medical Society of Delaware as its delegate at Milwaukee.

DR. BIRD: I move the adoption of that report, with thanks. It is one of the best we have ever had from the A.M.A. delegate, and I move its adoption with the understanding that when we adopt the recommendations and approve the report which covers the transactions of the A.M.A., it be understood that we are officially then sponsoring or approving the Minority Report of the Committee on the Costs of Medical Care.

... Motion seconded ...

PRESIDENT SPEER: Gentlemen, you have heard the motion as put that we accept the report of Dr. Wagner, and in the acceptance of the report we go on record as being in approval of the action of the House of Delegates of the A.M.A. in that we ourselves approve the Minority Report. Are there any remarks?

DR. J. P. WALES: I only have one objection, that is their lack of fortitude in not coming to the issue on birth control. (Laughter).

... Motion carried unanimously ...

PRESIDENT SPEER: Mr. Secretary, have you any unfinished business?

SECRETARY LAMOTTE: Last year at the general meeting it was voted to change Section 3 of Article V to read: "As the last order of business before adjournment of the morning session of the closing day of the session," we shall elect the president.

PRESIDENT SPEER: Section 3 of Article V reads: "The President shall be elected by ballot in the general meeting, without the intervention of the Nominating Committee, as the last order of business before final adjournment." The resolution as it read last year was as just now read by the secretary.

DR. BASTIAN: It should read: "The President shall be elected by ballot at the general meeting, without the intervention of a Nominating Committee, as the last order of business before adjournment of the morning session of the closing day of the session." I don't know whether we made that clear.

PRESIDENT SPEER: That was at the meeting held in Lewes in September last year. It is now up for discussion at this time.

... It was regularly moved and seconded that the resolution as read be adopted ...

PRESIDENT SPEER: Are there any remarks? Are you ready for the question?

SECRETARY LAMOTTE: This requires a two-thirds vote to pass it.

DR. P. W. TOMLINSON: It may have been stated already, but the reason for that resolution was that in waiting until the close of the business, when everything had been finished but electing the president, sometimes half of the members who had been in attendance had taken their departure for home, and it left a baker's dozen sometimes to elect the president.

PRESIDENT SPEER: Are there any other remarks? Are you ready for the question? All in favor will answer as their names are called.

... Roll was called and the motion carried unanimously ...

PRESIDENT SPEER: The motion has been unanimously passed that the resolution as read will now become part of our By-Laws. Is there any other unfinished business?

SECRETARY LAMOTTE: I don't have any.

PRESIDENT SPEER: Under the head of new business—first, resolutions. Have you any resolutions?

SECRETARY LAMOTTE: I have a letter here from the Treasury Department, Bureau of Narcotics, concerning an Act and copy of a letter which was addressed to me by Dr. William C. Woodward. He sent me a copy of this proposed law, which a number of states have passed. I have a copy here if anybody wants to see it.

... Secretary LaMotte read the letter ...

SECRETARY LAMOTTE: I took it upon myself, Mr. President, to write to the Commissioner, H. J. Anslinger, and he has sent a representative here. If you are willing to hear him he is here at this time. He is an attorney, and his name is Mr. Simpson.

DR. STRIKOL: Mr. President, while we are waiting, I move that we discharge all the special committees with thanks, as of December 31st.

... Motion seconded ...

PRESIDENT SPEER: Gentlemen, it has been regularly moved and seconded that all the special committees be discharged with thanks as of December 31st. Are there any remarks? The motion is carried.

SECRETARY LAMOTTE: Mr. President, I present Mr. Simpson of Washington.

Re: Uniform Narcotic Drug Act.

MR. SIMPSON: Mr. President, and gentlemen of the Medical Society of Delaware, the Honorable Harry J. Anslinger, Commissioner of Narcotics in Washington, has asked me to convey to you his sincere wishes for a most successful convention. Through his request and at the kind invitation of your secretary, Dr. LaMotte, we have been accorded an opportunity to speak to you briefly—and when I say briefly, it will be briefly—on the subject of the Uniform Narcotic Drug Act.

On October 18, 1932 there met in Washington what is known as the Commissioners on Uniform Laws, a national organization appointed by the governors of the states, two representatives from each state being present there, including the state of Delaware. There was presented before the convention the legislative child of the American Medical Association, the Uniform Narcotic Drug Act. Because of a number of features that the federal government is badly in need of, we stand behind the American Medical Association in asking each of the states to pass that legislation to fill the gap between state power and federal power through which a great many narcotic peddlers are escaping what they justly deserve.

Dr. Woodward has written to your secretary, I understand, and called attention to certain provisions of the Act, one of them affecting the doctors in so far as that relieves the medical board of the state, where they have been convicted of a violation of the narcotic law, from the unpleasant task of taking away their license. Now, Dr. Woodward uses that in so far as the doctors themselves are concerned, but we have a much broader use for it than that.

In Pennsylvania a few months ago two little boys left their home at six o'clock in the morning to gather mushrooms in a nearby field. At half-past six their bodies were found on the road badly mangled, both of them dead, and three miles further on a man slunk over the wheel of his machine, a taxicab driver, who was under the influence of narcotic drugs. That section of the Uniform Act can be used by the state to take away that man's license, not only the license of a taxicab driver, but an elevator operator, railroad engineer or any others. We have about five thousand cases a year, and they include every type of human being in every line of endeavor.

Now, Dr. Woodward also refers to the keeping of records. We know that it is a burden on doctors to have to keep records of narcotic drugs, but unfortunately the federal law requires it, but the state law will

loosen up a little bit. For instance, I can go into a drug-store in certain of the states and buy an exempt preparation. I don't need any prescription for it, but a doctor makes out a prescription and doesn't use any more narcotic than I get in that and he has to comply with the federal law, put his registry number and comply with every detail of the law. He has to keep records of all drugs he dispenses. Under the new state law he would not have to keep a record of drugs he dispenses where the amount does not exceed double the amount allowed in an exempt preparation. If that law goes through in the state, the federal regulations will be amended.

As far as the federal government is concerned, there are a number of features, and I will only touch on one or two of them which we are badly in need of. It provides that all manufacturers and wholesalers must be licensed—not doctors or dentists or veterinarians. Manufacturers and wholesalers at the present time are not required in most of the states to be licensed. They file an application with the Collector of Internal Revenue to handle narcotic drugs, and they tender to him the tax that the federal government requires. The Collector of Internal Revenue must register them; he has no discretion. A man may have been convicted a month before that of violating the Narcotic Law and be out on bond, but he can register as a wholesaler, get his forms from the federal government, and buy a thousand ounces of morphine the next day. We can't stop him. But under the state law if the state requires a license of manufacturers and wholesalers, the Collector of Internal Revenue may refuse to register any man until he has been licensed by the state. New York, New Jersey, Nevada and Florida have passed that law this spring. They send to us the name of every man who applies for registration as a manufacturer or wholesaler; we look him up and send an agent to investigate him and find out whether he is morally and financially responsible, and is equipped to safeguard the narcotic drugs after he gets them. If we advise the state officials that the man is not a proper person to handle narcotic drugs, invariably he is refused a license. If he is refused a license, the Collector of Internal Revenue may refuse him registration, and he can't get a hold of a narcotic drug.

This isn't something that may happen, but something that is happening, and has happened in a number of instances in the past. We have had cases in New York where they have ordered as high as 1500 ounces of morphine. They had two little rooms, and because they were suspicious we followed them up. They went to a number of concerns to get two or three hundred ounces from each one. They told one they had a purchaser from out of the state; to another one they said they were going to export; another manufacturer they told they were going to hold them for higher prices. We seized those drugs although we had no authority under the law to do it, and instead of going into court and getting an injunction to restrain us from interfering with legitimate business, through their attorney they asked us to return the drugs to the manufacturer so they could get the money back.

Now, that is a sample of it. We have had cases in which they bought a thousand ounces of morphine, and two days later the concern closed up, and later the narcotics reappeared in the illicit traffic.

Down in Florida recently we had a case of a narcotic farm. We found a man who was growing the opium poppy. He sold to one of our agents about \$600 worth of drugs, and then he told him he was growing these poppies, and if he would go into the business with him they could make plenty of money. The agent went out to the farm and found he was growing the opium poppy; got some of it and took it to the chemist and had it analyzed, and the man is now serving time in Atlanta. Had it not been for the fact that he sold our agent narcotic drugs and entered into a conspiracy to violate the Narcotic Act, we couldn't have touched those poppies.

The state alone has a right to license a man to grow narcotic drugs of any kind.

We don't wish to prohibit the growing of narcotic drugs. At the end of the World War there was less than three months' supply of narcotics in the United States. No manufactured drugs here are made from anything except cocoa leaves and opium imported into this country. There are a number of nations that are the principal growers of the crude narcotic drugs, and we don't wish to have the states prohibit the growing of the poppy or of the cocoa leaves, which can be grown successfully in this country, because of the fact that if it ever comes to the point where those countries enter into a combine to raise the price on the United States, we want to be in a position where men can be licensed by the states to grow the poppy or the cocoa leaves, and we can use that as a club over their heads.

Now, there is one other feature of the Act in addition to the question of the forging of prescriptions. Judge Chestnut at Baltimore ruled a few months ago that the United States Government has no right to prosecute for forging narcotic prescriptions. We have been doing it under a section of the law which provides that any "forging of the form required by the United States"—and the narcotic prescription is not a form required by the United States. You doctors, knew, of course, so far as liquor is concerned, they did have a specified form. Judge Chestnut's decision is in accord with the laws, and we are going to be faced with that all over the country. In one month after Judge Chestnut made that decision in Baltimore we picked up 163 prescriptions in the city of Baltimore. Narcotic addicts soon find out that they can't be prosecuted either under the state or federal law, and they flood that state with narcotic prescriptions. Now, your present law does not provide against the forging of narcotic prescriptions, but the Uniform Narcotic Drug Act does.

One other feature is this. Your present law provides that any man who is in possession of narcotic drugs and who obtains same in any manner except that as provided by your Act, shall be subject to a penalty, but that is not enough, gentlemen. A man may go to a doctor, as they have up in the New England states, and I have one specific instance in mind. He had a forged discharge from the army. He also had a forged certificate from a doctor that he was suffering from an incurable disease. He went into the doctors' offices and he opened his shirt and showed a bloody bandage across his stomach, and he pulled the bandage down and showed a wound in his stomach that for two years he had kept open with a dull knife for the purpose of getting narcotic drugs. With the bandage and the wound and the certificate of discharge from the army and the certificate of an incurable disease, any doctor that wouldn't give that man a prescription ought to have been put in jail himself. That is our opinion of it.

He went to twenty-eight doctors. Under the Uniform Narcotic Drug Act, it provides that any man who by fraud, misrepresentation, or deceit obtains narcotic drugs, whether he has a prescription or not, is subject to a penalty under the Act.

Those things, gentlemen, are something that we can't provide for. Once the tax is paid on the narcotic drugs, the United States has nothing to do with the possession of it. If a man goes into a drug store, breaks into it and steals narcotic drugs, and he is an addict and is found by a federal narcotic agent in possession of those drugs upon which the tax has been paid, we can't do anything to him because we work under the Internal Revenue Law.

I have only given you gentlemen a few instances of what this Act will do. I could go on and take up your time for fifteen or twenty minutes more. I understand a copy of the Act has been sent to your secretary. We need it. It isn't our Act; it is the Act of the American Medical Association, and the House of Delegates of that association on June 15th approved it and recommended its passage in every state in the Union. We are asking that you gentlemen go on record before your legislature

as being in favor of its passage, not only as a benefit to humanity but as an aid to the federal government. That is what we are asking you gentlemen, and that is what the commissioner has asked me to say to you. He has also asked me to say to you one thing of a personal nature.

Some of you gentlemen have probably never seen a narcotic inspector. We don't have trouble with the registrars, tax-paying, respectable, professional men, very little trouble—occasionally a case will arrive—but our men are instructed whenever they do come to check your records, to accord you the respect that is due you as an outstanding member of your community. The commissioner has asked me to say to you that if at any time any agent of the federal government, so far as the Narcotic Bureau is concerned, does not accord you that respect, he be reported immediately to Washington.

Gentlemen, we ask you to go on record as being in favor of the passage of the Uniform Narcotic Drug Act. I want to thank your president and secretary and you gentlemen for the courtesy of listening to me. (Applause).

DR. STRIKOL: I move, Mr. President, that we approve this Act.

... Motion seconded ...

PRESIDENT SPEER: It has been regularly moved and seconded that we approve the Uniform Narcotic Act.

DR. FLINN: Would it be in order for this matter to be referred to the Legislative Committee with power to act? Would that be the proper channel, or do we have the power to act on it?

PRESIDENT SPEER: Are there any other remarks? Are you ready for the question? All in favor give the sign of assent. Opposed? It is carried.

Mr. Secretary, have you any other resolutions?

SECRETARY LAMOTTE: When I went out there was handed to me the report of the President of the Woman's Auxiliary of the Medical Society.

PRESIDENT SPEER: Let's get that under communications.

SECRETARY LAMOTTE: There is a resolution approved by the State Board of Health which I will read.

Resolutions on Tuberculosis

WHEREAS, there is a lack of sufficient beds in which to accommodate the tuberculosis of the State, as evidenced by the lengthy waiting list of patients seeking admission to the State Sanatoria, and

WHEREAS, there is reason for belief that even this lengthy waiting list does not include all for whom treatment should be made available, and

WHEREAS, the necessity for the treatment of the colored tuberculosis in protection of the other residents of the State is apparent,

THEREFORE, resolved that the Medical Society of Delaware heartily supports the State Board of Health in the request for funds sufficient to permit of such additional construction as will meet the needs of the State in respect both of the tuberculous colored and of the white.

PRESIDENT SPEER: Gentlemen, you have heard the resolution. What is your pleasure?

... It was regularly moved and seconded that the resolution be adopted as read. There were no remarks and the motion was carried ...

SECRETARY LAMOTTE: I have a resolution here to offer which I believe has been approved by the Medical Advisory Committee of the Delaware Anti-Tuberculosis Society.

Resolution of the Medical Advisory Committee of the Delaware Anti-Tuberculosis Society to the Medical Society of Delaware.

That pulmonary tuberculosis is still one of the leading causes of death, is well known among all physicians, and many well-informed laymen. With this fact in mind, the Medical Advisory Committee of the Delaware Anti-Tuberculosis Society wishes to present the following plan to the Medical Society of Delaware for their cooperation and approval.

PURPOSE OF THE PLAN:

(1) The primary motive behind this plan is to prevent the child, with childhood type of pulmonary tuberculosis, from developing into the open adult type, which, in turn, will infect other children and thus cause a vicious circle; to discover new cases of tuberculosis as well as early infection, and to bring them under proper supervision and treatment.

(2) To accomplish this form of preventive health work we have three means of approach, namely:

(a) History and physical examination.

(b) Tuberculin skin test.

(c) Roentgen ray examination of the chest.

The combination of these three methods is most essential to the effective reduction of morbidity from pulmonary tuberculosis.

(3) The Committee agrees that for this work to be successful it must revolve around the family physician, with the Delaware Anti-Tuberculosis Society and Brandywine Sanatorium, cooperating in every possible way.

EXECUTION OF THE PLAN:

(1) Parents or guardians wishing to have their children tuberculin tested may apply to their respective family physician.

(2) The family physician may do the testing himself and charge an appropriate fee.

(3) In case the family physician wishes to do the testing himself, a card will be furnished him by the Delaware Anti-Tuberculosis Society on which to report his findings, either to the Delaware Anti-Tuberculosis Society or physician-in-chief at the Brandywine Sanatorium. *This report must be made.*

(4) In case the family physician does not wish to make the test, a consent slip will be furnished him by the Delaware Anti-Tuberculosis Society, upon which he may request that the test be done.

(5) This request slip will be sent to the Delaware Anti-Tuberculosis Society, who will in turn transmit it to the Laboratory, physician, or physicians who will be designated by the Medical Advisory Committee of the Delaware Anti-Tuberculosis Society who shall do the test and report results back to the family physician, the same as any other laboratory test is referred and reported on. Unless indigency is suggested on the request slip by the family physician the usual fee shall be charged.

(6) In case the patient has no family physician, a physician in the community, or elsewhere must be selected by the child's parents or guardian, and the request for the tuberculin test come through him.

(7) The positive reactors should be referred to a competent roentgenologist of the family physician's choice, for roentgenograms of the chest.

(8) The roentgenologist shall send a written report of his findings to the family physician.

(9) The charge of the roentgenologist shall be the usual fee, giving due regard to those who are only able to pay a reduced fee.

(10) All indigent cases to be roentgenographed at the Brandywine Sanatorium, upon the written certification of such indigency by the family physician.

(11) A notice of the days, time and place at which children may be tuberculin tested, to be decided by the Delaware Anti-Tuberculosis Society and Brandywine Sanatorium, be sent to every physician in the State. Such a notice should be in the form of a card which the physician may hang in his office for further reference.

(12) Tuberculin testing of children may be offered the schools of the State on behalf of the State Medical Society, Brandywine Sanatorium and the Delaware Anti-Tuberculosis Society, inviting their participation and cooperation.

FINAL DISPOSITION OF CASES:

(1) After the child has been found to be a positive reactor and a confirmatory roentgenogram taken, the patient is then referred back to the family physician for his guidance.

(2) In case the family physician feels that

home conditions are not conducive to proper treatment, he may arrange any sanatorium or other treatment which he may deem wise.

(3) Record cards in all cases, showing results of the tuberculin test shall be filed with the Brandywine Sanatorium for reference and future study.

(4) Roentgenograms taken by any and all roentgenologists shall be sent to the Brandywine Sanatorium for classification and filing for comparison with further progress roentgenograms.

DR. STRIKOL: Every member of the Society got a copy of this.

PRESIDENT SPEER: Are you ready to vote on this as a resolution? It has been regularly moved and seconded that the resolution as presented from the Delaware Anti-Tuberculosis Society be approved. Any remarks?

... Motion carried unanimously ...

PRESIDENT SPEER: Are there any other resolutions, Mr. Secretary?

SECRETARY LAMOTTE: From the Wilmington Public Schools—this is brought to my attention by the Director, J. E. W. Wallin.

Resolution on Schools for Handicapped Children

Resolved, That the Medical Society of Delaware commends the efforts of the State Department of Public Instruction and of the schools of the State to discover children who are subject to defects and maladjustments which interfere with the processes of normal development and learning, to adapt the contents and the processes of instruction to meet the needs of all types of physically and mentally handicapped children, and to make available whenever possible throughout the State centralized special classes for physically and mentally handicapped children.

Be it further resolved, That it is the sense of this Society that a special grant should be made in the State public school budget for the financial support of the educational program for handicapped children, and the Association bespeaks the cooperation of its members in the early discovery, examination and diagnosis of such children.

PRESIDENT SPEER: Gentlemen, for those of you who have not been informed as to the program referred to in this resolution, I am going to ask Dr. Heck to explain it briefly.

DR. A. L. HECK: Did he say mentally and physically, or just mentally?

DR. LAMOTTE: Physically and mentally handicapped children.

DR. HECK: I know nothing about the resolution brought by the state, but I do know in regards to what is going to be done here in Wilmington next year. That is, they would like to have the so-called fresh air clinics in two schools, particularly for heart cases and crippled children. I knew nothing about the mentally handicapped children. At the present time there are many children in Wilmington who because of heart lesions are unable to go to school, because in a lot of the schools they have to go up and down the steps in going to the various classes. Their plan is to have a room in the lower school in this new Harlan School for children who have heart lesions and children who are physically handicapped, because of amputations maybe, and there are several children in school who have only one leg and go about on crutches, and others crippled because of spinal meningitis, and it is almost impossible for those children to get from one room to the other without aid. That is the object of these two so-called fresh air classes. Of course, later on they expect to work in children who are under weight and potential tuberculosis cases. That is all I know about it.

PRESIDENT SPEER: There is a Dr. Wallin who is the directing head of this plan. He came in to see me and went into it thoroughly. It is just as Dr. Heck said, a plan where a certain room is set aside in a school, where the children may even be on cots part of the day, and yet they will be able to take advantage of education up to a certain point, where if such measures as these

were not taken for them they would get no education whatever. His idea is that in all new schools such departments will be set up, and they are going to try and make such departments in some of the more recent schools. I did not, however, know that he would want us to go on record as approving any expenditure, and I believe in that resolution you did say something about approving of an expenditure. I would like to hear some discussion on it.

DR. WALES: I think we have already provided for the cardiac children, haven't we? I think that was to start this fall. You said the tubercular child—they are not going to have the tubercular child in the school, are they?

PRESIDENT SPEER: I believe they can take care of thirty children in each one of the two units.

DR. WALES: The cardinal thing was to keep the children on one floor. I believe it was to be opened this fall. Is that this same scheme?

DR. HECK: Yes.

DR. WALES: I think until we know more about that I would move it be laid on the table.

DR. STRIKOL: I move that we refer that to the proper committee for investigation and report at a later date.

DR. B. M. ALLEN: I would like to ask one question. Is that Dr. Wallin a Delaware physician?

PRESIDENT SPEER: He is not a physician; he is a Ph. D.

SECRETARY LAMOTTE: He is Director of the Department of Special Education and Mental Hygiene.

DR. ALLEN: These are physical defects you are talking about, not mental hygiene. I don't see what a Ph. D. has to do with heart diseases and infantile paralysis and things of that sort.

DR. M. I. SAMUEL: I think the resolution has many good points but I don't think it has been worked out sufficiently. I don't think they know themselves what they intend to do, so until they do present something that is better, I move the resolution be tabled.

DR. BIRD: I might say that I believe we are all agreed in principle the bill is a beneficial one. The rub in the whole thing is the matter of increasing the tax rate. I think it is fair enough for this body to go on record as approving the principle if it can be managed with a shift of expenditures from one branch of the Board of Education to this department, whatever they are going to call it, this division, without increasing the tax rate. Then I would say we should wholeheartedly approve it, if it doesn't involve an increase in the tax rate.

DR. HECK: The state is responsible for the education of every child, whether he is physically or mentally handicapped or not. I understand at the present time they are sending some of the blind children out of the state. That costs I don't know how many hundred dollars a year—\$700 for each child. If they can do that for the blind children, certainly these children who have physical defects are entitled to an education.

DR. MAYERBERG: I would just like to correct an impression made that the Board of Education appropriates for the blind children. We do not receive a cent from the Board of Education for the blind children. That is a separate appropriation from the legislature and private funds we have. It costs us \$700 a year for each one, and we have a question now with the city and state board of how to get funds to educate our blind. They are not doing anything for us at all; they are responsible but they do not take the responsibility.

DR. BIRD: I suggest that the floor be given to Dr. Tarumian.

DR. TARUMIAN: I am acquainted with this particular department, and with Dr. Wallin who has been connected with the Special Education Department of the Department of Public Education for the last two years. After fighting this problem for the last ten years with the Department of Public Education, they created this particular subdivision. It is supposed to take care of all mentally handicapped children as long as they are in the public schools. Unfortunately, as you know, we

have only very few special classes connected with public schools, and very few opportunity classes. As Dr. Heck described it with the physically handicapped, they have absolutely been neglected.

As I understand it, Dr. Wallin is on part time for the city department and part time for the state department. I think he is giving two days to the city and two days to the state, trying to co-ordinate the work of all those who are in charge of the handicapped, whether physically or mentally handicapped. As you know, quite a few defective children are kept in the schools up to the point where they will be able to adjust themselves extramurally. I understand Dr. Wallin wanted to have the endorsement of this Society that such a department is essential for the proper care of handicapped children in this state, and that the doctors are backing this particular problem or proposition whatever it might be.

PRESIDENT SPEER: There is a motion on the floor that the resolution as read be given to the proper committee for them to decide. Is there a second to that motion?

... Motion seconded ...

PRESIDENT SPEER: It has been regularly moved and seconded that the resolution as read be given to the proper committee for their disposal. Are you ready for the question?

... Motion was carried ...

PRESIDENT SPEER: I think that is a better way, because the resolution is at fault. We are perfectly willing to back up the project, the principle of it, but the resolution itself does not state what we are ready to back up.

SECRETARY LAMOTTE: There is an explanation here of the Department of Special Education and Mental Hygiene in cooperation with the Department of Medical Inspection in Wilmington Public Schools.

... The resolution was referred to the Committee on Public Policy and Legislation ...

Resolution on Diets

WHEREAS:

Much misinformation is promulgated today concerning the question of diets, thus causing the introduction of food fads, very few of which can take the place of the older staple foods; and whereas, Any balanced diet should contain animal protein, fruits, vegetables, especially the leafy vegetables, and the better grades of bread prepared from flour which will insure adequate vitamin and mineral salt content, digestible fat such as butter-fat, and sufficient of the digestible carbohydrates to afford readily available energy; and, whereas, The allegation that white bread, meat or any other staple food, when employed in mixed diet is responsible for certain grave illnesses, is not supported by scientific facts,

THEREFORE, BE IT RESOLVED THAT:

We desire in the public interest, to place on record that in our opinion:

1. The exaggerated claims for various fad foods are unwarranted by scientific evidence or practical experience; and the advertising and other propaganda furthering their substitution for the older articles of diet should be condemned.
2. The danger of nutritional deficiencies has been grossly exaggerated. No one food is a perfect food; but a diet consisting of dairy products, leafy vegetables, fruits, meats and easily digested starches furnishes an excess of all food factors necessary for proper growth and nutrition and resistance to disease.
3. Any variation from a normal diet should be prescribed only by a properly trained physician after a careful study of the dietary requirements of the individual seeking advice.

DR. BASTIAN: I move the resolution be laid on the table.

... Motion seconded. No remarks or objections, and the motion was carried unanimously ...

PRESIDENT SPEER: Have you any other resolutions?

SECRETARY LAMOTTE: No. I have a letter here from the Commonwealth of Pennsylvania, Department of State Board of Public Education, Harrisburg, for your information and guidance. That is your specialty, Mr. President. (Letter handed to President Speer).

Here is the report from Mrs. Tomlinson, the President of the Woman's Auxiliary to the Medical Society of Delaware.

Report of the Woman's Auxiliary

In making my fourth and final report to the Medical Society of the activities of the Auxiliary and its officers, I find myself at a loss to express the pleasure that has been mine during the years I have been President of the Auxiliary and the real regret, that I feel at relinquishing that office.

During the past year the members of the Auxiliary have done much to help its activities in every way. The regular meetings were held with excellent speakers. Under the leadership of Mrs. C. E. Wagner many attractive garments were made for the Visiting Nurse Association. The City Federation meetings and those of the Woman's Joint Legislative Committee in Dover were regularly attended. A special NRA meeting was held and entire cooperation with this National movement was evident. Mrs. Burns and Mrs. Preston attended the NRA Committee meetings. The work of promoting Hygeia has been of great interest and satisfactory work has been done, although hampered by the illness of the Chairman, Mrs. Liefeld. The exhibit during this meeting is taken care of by that Committee. Mrs. Bird, Editor, has attended to proper notices for the Journal and material for the exhibits in Milwaukee. The Health Day of the Philadelphia County Auxiliary was attended and the members were deeply interested. One thousand postal cards, regarding the Public Meeting sponsored by the Medical Society during this convention, were mailed by the Auxiliary and some newspaper work done for the same meeting.

During the year I, as President of the Auxiliary, broadcasted twice for the Anti-Tuberculosis Society and twice for the NRA. I worked during the Legislative Session for Tuberculosis Legislation sponsored by the Medical Society, and spoke before the Governor's Federal Works Commission on Funds for Brandywine Sanatorium. I attended Auxiliary meetings in Philadelphia and Camden, and the National Convention in Milwaukee where I was chosen President-elect of the Auxiliary to the American Medical Association. If in accepting this high honor I may reflect anything of credit on our State Society, it will be small payment for the pleasure that has been mine during the past four years, and during my term of office I shall need every encouragement that can be given me. I wish in closing to express my heartfelt appreciation for the courteous consideration that I have at all times received from your Society; to the four Presidents of the State Society under whom I have served, Dr. MacCollum, Dr. McElfatrick, Dr. Hocker and Dr. Speer, and also to Dr. Davies, Chairman of the Advisory Committee, for his ever pleasant cooperation and valuable advice.

It is with regret that I give up the office of President of the Delaware Auxiliary on January first and yet with entire confidence in the ability of my successor and her helpers. When I assume the highest office in the power of the Auxiliary to bestow, I shall never forget that first and primarily I am a member of the Delaware Auxiliary and its representations, and at all times at its service.

Respectfully submitted,

MILDRED HUTTON TOMLINSON,

President.

... Regularly moved and seconded that the report be accepted. Motion carried unanimously ...

PRESIDENT SPEER: Are there any further communications?

SECRETARY LAMOTTE: I don't think so.

PRESIDENT SPEER: Any appropriations?

SECRETARY LAMOTTE: It has been customary for the House to vote that all expenses connected with this session be paid when approved by the Finance Committee.

DR. BIRD: I so move.

... Motion seconded, and carried unanimously ...

PRESIDENT SPEER: I will entertain a motion of approval of the scientific program of this meeting.

... Such a motion regularly made and seconded and carried unanimously ...

PRESIDENT SPEER: The selection of a meeting place for next time: Kent County.

DR. I. J. MACCOLLUM: Mr. President, I will ask for the Kent County Medical Society that the next meeting place be at Dover, Delaware.

... Motion made that the invitation be accepted ...

PRESIDENT SPEER: It is regularly moved and seconded that the invitation of the Kent County Society to meet in Dover next year be approved. Are there any remarks?

... Motion carried unanimously ...

DR. J. W. BUTLER: Mr. President, if it is in order at this time—all those with whom I have spoken have been in agreement with me—I would present the motion that the meeting of the Medical Society of Delaware be changed to the former dates in October.

... Motion seconded ...

DR. BIRD: As I understand it, the reason for changing our meeting date from October to September was to permit a large number of our members to attend the meetings of the American College of Surgeons, and other meetings held in October. Another reason is that when it goes to Sussex County, we may be entertained at Rehoboth, and September is a better month. I rather question the advisability of going back to the old dates.

DR. STRIKOL: Not only that, but the Pennsylvania State Society, for instance, meets on the second of next month, and most likely they meet every year the same month and the same week, and it is near, and a lot of our men possibly would care to go up there and participate in their program.

PRESIDENT SPEER: The way the chair looks at it is this. Granting all that, there are 178 members of this Society, and how many or what percentage is going to go to these other society meetings? If the consensus of opinion of this Society is that they want to meet in October, all right. If they want to meet in September, all right.

DR. G. W. K. FORREST: The time and place formerly was always specified at every meeting of the House of Delegates. There was no specified time, but it was a sort of understood thing that it would be the second Tuesday in October, so as not to conflict with other meetings.

PRESIDENT SPEER: There is a motion on the floor that the meeting next year be held the second Tuesday and Wednesday in October. Are you ready for the question? All in favor give the usual sign of assent. Opposed? All in favor stand up, please. All against please stand up. The ayes have it and the motion is carried.

Mr. Secretary, have you any miscellaneous business?

SECRETARY LAMOTTE: No, sir.

PRESIDENT SPEER: We will then listen to the report of the Nominating Committee.

Report of the Nominating Committee

DR. TOMLINSON: The president, as you all know, is nominated on the floor of the general session. For first vice-president, Dr. Paul R. Smith; for second vice-president, Dr. E. L. Stambaugh; for secretary—we have been advised, and you heard the same thing last year, that our efficient, faithful secretary has expressed a desire to be relieved of his onerous duties. There was no move made to accommodate him last year. He has certainly been a very faithful servant of the Society. The Nominating Committee has presented the name of Robert W. Tomlinson. I want to say here that the name of Dr. Speer was put on as secretary, and Dr. Speer said to me: "Not if someone else wants the job."

I said: "I don't know whether someone else wants the job or not." The outcome was, I think, that Bob said he would take it, and Robert W. Tomlinson was put in instead.

For treasurer, Dr. A. L. Heck. I don't think Dr. Rumford is anxious to continue in the position.

For the Committee on Scientific Work: Dr. R. W. Tomlinson, Dr. C. B. Scull and Dr. Roscoe Elliott.

For the Committee on Public Policy and Legislation: Dr. J. B. Niles, Dr. J. H. Mullin, Dr. William Marshall, the President, and Dr. W. H. Speer.

For the Committee on Publication: Dr. W. E. Bird, Dr. M. A. Tarumian, and Dr. W. H. Speer.

PRESIDENT SPEER: That must be corrected. It must be the secretary on the Committee on Public Policy and Legislation, and on the Committee on Publication.

DR. TOMLINSON: For the Committee on Medical Education: Dr. E. R. Mayerberg, Dr. C. L. Harmonson, and Dr. William P. Orr.

For the Committee on Hospitals: Dr. Stanley Worden, Dr. Samuel Marshall, and Dr. John Pierson.

For the Committee on Necrology: Dr. W. T. Chipman, Dr. Dorsey Lewis, and Dr. M. C. Smoot.

For Councilors: Dr. R. W. Tomlinson, Dr. J. Martin, and Dr. U. W. Hocker.

PRESIDENT SPEER: You can only nominate one councillor each year.

DR. TOMLINSON: Then it would be Dr. James Martin, of Kent County.

For the delegates to A.M.A.: Dr. Ira Burns; alternate, Dr. Joseph Bringham.

PRESIDENT SPEER: That is out of order.

DR. TOMLINSON: For the Examining Board: Dr. John Mullin, Dr. L. J. Jones, Dr. W. H. Speer, Dr. E. H. Lenderman, Dr. W. E. Bird, Dr. C. B. Scull, Dr. J. P. Waples, Dr. J. McDaniel, Dr. Wid Marshall, and Dr. H. V. P. Wilson.

PRESIDENT SPEER: Gentlemen, you have heard the report of the Nominating Committee. Are there any remarks?

DR. BUTLER: Mr. President, I would like to present the name of Dr. William Speer for secretary.

DR. SPRINGER: I want to say this. There are several offices in this Society which are very important, and in accordance with the custom in other societies and this Society in the past, I think if possible those offices ought not to be changed; that is, the members holding those positions, unless there is some special reason for it. One of those offices is the secretary, and that takes in also the question of the editor and manager of the Journal. The secretary, of course, is ex officio a member of the board of management of the Journal. The other one is the State Board. This year Dr. Davies' term expires, and Dr. McDaniel's term expires next year, and they have been satisfactory members of the Board, certainly. I see Dr. McDaniel's name is on there but Dr. Davies', I think, is not. It is customary to put back on the Board the names of the men whose terms expire unless there is some special reason why they shouldn't go back, so I would like to make the suggestion that Dr. Davies' name be put on the list. There would have to be one name taken off, the Nominating Committee could do that, but I certainly would like to see Dr. Davies' name on it.

The other thing I had in mind was that I wanted to make sure the Nominating Committee understood Dr. LaMotte correctly. He has certainly been an able and efficient secretary of this Society, not only in the position of secretary, but also as a member of the Board of Managers of the Journal. Now, if Dr. LaMotte is determined and insists upon not being nominated again, I haven't anything further to say, but I would like to hear an expression of opinion from Dr. LaMotte as to whether he would consider it, because he has been so satisfactory, and he knows the job, and has made such

good contacts and is well known throughout the country by secretaries of other societies. I say this with no reflection on any other of the nominees, but I do think that unless Dr. LaMotte is determined to go we should reconsider it. We ought certainly to hear an expression of opinion from him.

PRESIDENT SPEER: Are there any other remarks?

DR. SPRINGER: I would nominate Dr. LaMotte for secretary.

DR. TOMLINSON: I think the Committee didn't recall that Dr. Davies was on the Medical Examining Board.

DR. O. V. JAMES: If you will permit me, I will say that I didn't know that Dr. Davies was on the Board or his time had expired, so that is the reason his name does not appear there, and I can emphasize what Dr. Tomlinson has said about Dr. LaMotte. That question was raised. One of the first that we asked was: "Will Dr. LaMotte accept the position as secretary?" And Dr. Tomlinson said he had been informed that he did not want it and would not accept it.

PRESIDENT SPEER: Will you three men confer in the matter as to which name you are going to take off, and put Dr. Davies' name on?

DR. WALES: I can hardly agree with some of the remarks Dr. Springer made. I think in a society as large as ours, to say there are some offices which should never be changed is rather a broad statement. It looks as if it was a life job for certain men if they want it. I don't for a moment agree with him, but there are certainly plenty of men able to discharge the duties, if not any better than Dr. LaMotte, or any of the other duties. Personally I believe in rotation in office, but not every year. I think Dr. LaMotte said at Lewes last year that he wanted to be relieved, so I think Dr. Springer is wrong there.

DR. SPRINGER: I didn't say anybody ought to stay in office forever, but I say unless there is some very special reason for them not to be re-elected, because those offices function best, especially that of secretary, by keeping the same man in office. It is done in practically all medical societies. It really amounts to a lifetime job if a man wants it. Dr. LaMotte has been so satisfactory, I think it is only a matter of courtesy to take the stand I have about it.

SECRETARY LAMOTTE: Mr. President, up until a couple of years ago or so I enjoyed the work, this secretarial work. I was always interested in trying to do what I could for the medical organizations, building up medical societies, improving programs, and having good speakers, etc., but it has kind of been a burden to me the last couple of years. Maybe it is a sign of age or something like that, but I have had a pretty good long time at it, and last year, as I said, I was anxious not to have it, but the representatives there seemed to be unanimous in asking me to stay in it. My whole desire, of course, is for the good of my profession, and particularly the state organization here. I would be glad to be relieved of the office. I am not anxious to stay in and it means a lot of work, and I think somebody else ought to take the thing up. I certainly couldn't have stayed in very many years if I hadn't had a secretary. It would have been impossible. As it is, she has to do a lot of the work on my time, and it takes a lot of time. I couldn't do it by myself. I would be glad if somebody would be willing to take it and handle the job.

DR. SPRINGER: If Dr. LaMotte feels that way about it, I am satisfied to withdraw his name.

PRESIDENT SPEER: When I went for some stationery a month ago, the girl said there was no more and she would not let her have any more printed with his name on it. That was a month ago.

DR. STRIKOL: I would like to nominate a man who is very familiar with this organization and I think is as capable as the next man, and there is no doubt that he will fulfill the office possibly as well as Dr. LaMotte, and that is Dr. Charles P. White. He told me he would

not run against or oppose Dr. LaMotte, but otherwise I think he will take it, and I nominate Dr. C. P. White as secretary of the State Medical Society.

DR. WHITE: It does me quite a high honor, but I think I can advance the same reason that Dr. LaMotte does. I don't believe I would have the time to do it. If perchance you did elect me secretary I would be filling his place, but I don't believe I could do the work any better. It is too bad that Dr. LaMotte feels he has to resign, because he has been a good secretary. I think it is a thankless job, to begin with. I feel sure there is a lot of work in connection with it. I feel deeply assured that some younger man who has more time than I have ought to get it. Personally, I feel obliged to decline.

PRESIDENT SPEER: You decline do you, Dr. White?

DR. WHITE: Oh, yes.

PRESIDENT SPEER: The Nominating Committee has removed the name of Dr. Scull from the Medical Examining Board, and inserted the name of Dr. Davies instead.

DR. TOMLINSON: Mr. President, the committee has agreed that if it is your pleasure, and you are willing to serve, we will let your name stand, as it was at first, as secretary of the Society.

PRESIDENT SPEER: Are there any other nominations for secretary?

DR. WALES: I move the nominations be closed.

... Motion seconded ...

... President Speer read the Nominating Committee's Report in final form, and the names to be suggested to the Governor for the Medical Examining Board, as listed ...

First vice-president, Paul R. Smith, Wilmington.

Second vice-president, E. L. Stambaugh, Lewes.

Secretary, W. H. Speer, Wilmington.

Treasurer, A. L. Heck, Wilmington.

Councillor, James Martin, Magnolia.

Delegate to A. M. A., James Beebe, Lewes.

Alternate to A. M. A., Charles E. Wagner, Wilmington.

Committee on Scientific Work: C. B. Scull, Dover; J. R. Elliott, Laurel; W. H. Speer, Wilmington.

Committee on Public Policy and Legislation: J. B. Niles, Townsend; John H. Mullin, Wilmington, William J. Marshall, Milford; W. H. Speer, Wilmington; J. S. McDaniel, Dover.

Committee on Publication: W. E. Bird, Wilmington; M. A. Tarumianz, Farnhurst; W. H. Speer, Wilmington.

Committee on Medical Education: E. R. Mayerberg, Wilmington; C. L. Harmonson, Smyrna; W. P. Orr, Lewes.

Committee on Hospitals: Stanley Worden, Dover; Samuel Marshall, Milford; John Pierson, Wilmington.

Committee on Necrology: W. T. Chipman, Harrington; Dorsey Lewis, Middletown; M. C. Smoot, Greenwood.

Names to be submitted to the Governor for his selection of two as members of the Medical Examining Board:

Drs. J. H. Mullin, L. J. Jones, W. H. Speer, E. H. Lenderman, W. E. Bird, T. H. Davies, J. B. Waples, J. S. McDaniel, W. T. Marshall, H. V. P. Wilson.

PRESIDENT SPEER: It has been regularly moved and seconded that the nominations be closed. Is there any question?

... Motion carried unanimously ...

DR. WALES: I move that the report of the Nominating Committee be accepted.

... Motion seconded, and carried unanimously ...

DR. WALES: I move that the secretary cast a unanimous vote for the nominees, as submitted by the Nominating Committee.

... Motion seconded and carried unanimously ...

... Adjournment at 12:00 midnight ...

The President's Page

Gentlemen:

It is very hard to keep the medical racketeers down, as is evidenced by recent communications I have received from Akron, Ohio, where the Natex man has established himself, and from Milwaukee, where Dinshah P. Ghadiali is working. I have been in communication with both places and they are taking measures to oust them, as we did here. The police are also not waiting for us to institute proceedings, as you have undoubtedly noticed in the recent papers where "Prince Henri" was apprehended, tried and sentenced to one year in the workhouse.

A meeting is being arranged with the Federal Emergency Relief Administration for the purpose of discussing the rules and regulations governing medical care provided in the home to recipients of unemployment relief. We in Delaware are not getting fees that are being paid in the other states, and an attempt is being made by your officers to see that this is done. The approaching winter is going to place upon us a greater call for our services to this type of patient than ever before, and it is not fair to our members, when funds are available to pay for such services, that we do not receive them.

The tumor clinics are progressing favorably throughout the State. The statement in the press concerning the starting of these clinics at the Wilmington General Hospital was incorrect in that they had been started in July at several of the other hospitals. Let me bring to your attention the availability of the free tissue diagnosis service in connection with these clinics. Any doctor who does a biopsy may have this tissue diagnosed if he will just send it to Dr. Douglas M. Gay, 14th and Washington Sts., Wilmington, and a report will be forthcoming within a reasonable time after the tissue is received. These clinics are for the benefit of both the doctor and the patient, and are especially serviceable to the physician because there is no separation of his patient from him.

I hope you all have many things to be thankful for, and as we approach the holiday season let us all enter into the public spirit with a will to help, which we should do, representing as we do, one of the time honored professions.

Sincerely,

W. H. SPEER, M. D.

EDITORIAL

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W. EDWIN BIRD, M. D. Editor
Du Pont Building, Wilmington, Del.

W. OSCAR LAMOTTE, M. D. Associate Editor
Medical Arts Building, Wilmington, Del.

M. A. TARUMIANZ, M. D. Associate Editor & Bus. Mgr.
Du Pont Building, Wilmington, Del.
Telephone, Wilmington, 4368

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COURT RULING ON FEE SPLITTING

Considerable publicity has been given to a novel case recently decided in the Surrogate's Court of New York County, New York, in which the division of fees by physicians was involved.

The case arose from a provision in the will of the late Henry Sterne which established trusts for the benefit of the Montefiore Hospital and the Hospital for Joint Diseases, New York City, but provided that to become eligible the two institutions must "make a binding rule to the effect that any and all physicians at any time practicing for remuneration in the said respective institutions shall be required to and shall pay toward the maintenance and support of the said institution a sum of money equal to 10 per cent of the gross fees which shall at any time be received by such physician respectively for services performed by them in the said institutions".

A protest against this provision of the will was filed in the Surrogate's Court by the two hospitals, the petition stating that the condition imposed upon them a rule of conduct which was in violation of public policy, compelled the division of fees by physicians, and would impair the efficiency of the hospital.

In deciding the case in favor of the hospitals and striking the provision from the will, the court declared:

"It is immaterial whether the division of medical fees occurs between a physician or a layman, or a physician and a physician in cases prohibited by the canons of ethics, or, as in the situation here, between a physician and a hospital. Inevitably such a method of division would lead to deterioration in the medical staffs of hospitals with attendant injury to the public. It would likewise subject some physicians to the temptation of overcharging their patients to meet the requirements of the hospital rule.

"Although the difficulty in enforcing the condition might not of itself be a ground for a determination of invalidity, where, as here, it is mingled with a requirement that is unreasonable, unethical and in violation of public policy, the court cannot sustain it."

This attitude of the New York court is encouraging. It is possible it may blaze the trail for similar settlements of bad situations elsewhere, where division of fees is not necessarily involved, but where commercialized ventures in supplying medical services are flourishing.

It may become necessary for those familiar with the dangers of many medical and hospital service schemes to turn to the court to protect the public. It is easy to imagine the short work which could be made of some medical rackets were the projects taken to court for judgment on their merits in the light of public policy and public benefit.

The above editorial, from the *Ohio State Medical Journal*, November, 1933, raises a question that seeks an equitable answer. Under any guise, whatsoever, the division of fees between a physician and a layman, or between two physicians, merits the severest condemnation, since it represents one of the vilest of human practices—the barter and sale of sick people. No decent practitioner would knowingly stoop to do such a thing; and those who have degenerated into mere commission merchants always carry on their manipulations furtively and in secrecy and darkness. Widespread though it seems to be, the thing is so abominable that even its advocates dare not openly ply their trade.

But in the hospitals a situation has gradually arisen that, as measured by this decision of the New York Court, seems like an official variety of fee-splitting. Many hospitals have an arrangement with their radiologist, their pathologist, or their laboratory technician whereby said staff member receives a certain percentage of the fees charged by and paid to the hospitals. Since the essence of fee-splitting is secrecy, and since the hospital tariffs and the appointments thereunder are available to all who may inquire, this practice, strictly speaking, is not fee-split-

ting; on the other hand, it is a frank and public division of fees. Whether such a state of affairs is in the interest of either the public or the profession, or of the hospital itself, is again a debatable question. Certain it is, this court decision bids fair to set a precedent which everyone concerned must bear in mind.

The preliminary schedule of the cancer clinics that have been established in five of the hospitals of this state seems to be working satisfactorily. These clinics are for diagnosis and follow up work, and no patient will be received unless referred by his family physician. Should a patient apply who claims he has no family physician, he will be told to select one, as a report will be given only to an accredited physician. No treatment will be undertaken except at the request of the physician, nor will biopsy be done unless so requested. The work so far done is on a tentative basis, to see if the organization, staff, and system will function as desired. The work is under the general supervision of the Delaware Committee of the American Society for the Control of Cancer, and is being financed largely by that Committee.

The clinics, which are all under the immediate directorship of Dr. Douglas M. Gay, a pathologist, were started in July, 1933, except that at the Wilmington General Hospital, which opened in September. The schedule is as follows:

Milford Emergency Hospital, Milford: first Thursday, at 11 a. m.

Kent General Hospital, Dover: first Thursday, at 2 p. m.

Beebe Hospital, Lewes: third Thursday, at 2 p. m.

Wilmington General Hospital, Wilmington: second and fourth Thursday, at 4 p. m.

Delaware Hospital, Wilmington: second and fourth Friday, at 4 p. m.

Medical journalism has lost one of its "regulars" in the death, on August 31, 1933, of Dr. William R. Bathhurst, who died suddenly at the age of 57. Dr. Bathhurst was Professor of Dermatology at the University of Arkansas, at Little Rock, was a perennial delegate to the A. M. A., secretary of the Arkansas Medical Society since 1919, and editor of the *Journal of the Arkansas Medical Society* since 1912. It was largely due to his exceptional abilities that, un-

der his editorship for the past twenty-one years the Arkansas Journal rose to its present high standing among the state journals. In 1927 he was the president of the Southern Medical Association, a post generally regarded as second only to the presidency of the A. M. A.

We present our sincere condolences to our friends in Arkansas. Dr. Bathhurst's dual role of secretary-editor will be hard to fill; we wish his successor every success.

OBITUARY

L. HEISLER BALL, M. D.

Dr. L. Heisler Ball died at his home at Faulkland, of pneumonia, on October 18, 1933.

Dr. Ball was a member of an old and distinguished family of that name whose first ancestors settled in Delaware in pre-Revolutionary times. The original homestead was built at Milltown, on a 500-acre tract of land in 1651 and in 1661, William Penn added a grant of 500 acres, making a family estate of 1,000 acres, a part of which is still in their possession.

It was on this estate that Dr. Ball was born, on September 21, 1861, a son of John and Sarah Baldwin Ball.

HELD DELAWARE, PENN DEGREE

After attending public schools until he was 14, he entered Rugby Academy, and was graduated in 1879, after which he continued his studies at Delaware College. He was graduated from Delaware in 1882 with the degree of Bachelor of Philosophy and during the following three years studied medicine at the University of Pennsylvania. In 1885, he received his degree of Doctor of Medicine from that institution.

Moving to the old Dr. Swithin Chandler estate at Brandywine Springs, synonymous with Faulkland, he began the practice of medicine and always remained in that section.

A staunch Republican, Dr. Ball was elected in 1894 as chairman of the Republican County Committee, serving for 28 years, and from 1902 to 1904 was state chairman. In 1898 he was elected state treasurer, serving until 1900, when he was elected as Representative in Congress. In March, 1903, Dr. Ball was elected to the United States Senate to fill a vacancy and was senior Senator for two years.

Dr. Ball again took his seat in the Senate on March 1, 1919, after being elected on the Republican ticket. During his term in office he was an active member of the naval committee and also chairman of several subcommittees. He presided over the deliberations of the District of Columbia Committee for four years.

At the time his term in the Senate expired, on March 4, 1925, President Coolidge nominated him as a member of the Board of Investigation of the Veterans' Bureau, and during the ensuing five months was active in its work. He then again returned to resume his profession.

Dr. Ball was married on November 14, 1893, to Miss Catherine Springer Justis, of Delaware. His wife, a sister, Miss Anna Ball, and three brothers, Edwin, Harvey and George Ball, all of near Wilmington, survive him. There were no children.

Dr. Ball was a past master of Armstrong Lodge, No. 26, A. F. and A. M., and a member of the supreme form. Ancient Order of United Workmen.

He was a member of the Presbyterian church. Dr. Ball was active as an athlete at Delaware and the U. of P., and won high jumping honors in contests at Delaware.

The funeral, which was largely attended, was held at his home on October 20, 1933, with the burial at St. James' Cemetery.

MISCELLANEOUS

Chicago Board of Health

Reports received by us have revealed in all parts of the country an unexpected and even startling number of cases of Amebic Dysentery, the source of which was probably traceable to a visit to Chicago. These reports were received in response to a questionnaire sent out by us to 15,000 guests registered at a single Chicago Hotel, from May 1 to date, and they undoubtedly represent only a small fraction of the actual number of cases.

We believe that Amebic Dysentery is a public health problem of much greater magnitude than is generally recognized by health officers and the medical profession. Our immediate concern now is in regard to those cases which remain unrecognized and thus not properly treated, nor any measures instituted to protect the community as well as those cases, which through wrong diagnosis, are being operated upon and almost invariably are ending fatally.

In view of this situation we are broadcasting Tuesday night at 7:30 Central Time, 7:30 Canadian Time, 8:30 Eastern Time, 7:45 Mountain Time, and 8:45 Pacific Time, over a nation-wide hookup of N B C, the complete story of this outbreak.

We suggest that you notify the secretary of each County Medical Society in your state requesting that his membership listen in. This is most important to the medical profession.

Comments on Higher X-Ray Voltages

ALBERT SOILAND, Los Angeles (*Journal A. M. A.*, Sept. 30, 1933), suggests that the new high voltage roentgen tube will supplant radium. It is possible, when its distribution has become more generalized, that it may supplant the use of the large and expensive radium pack or radium gun, affording opportunity to convert the latter into highly filtered platinum needles or tube applicators for interstitial use. This type of treatment offers an entirely distinct and different field from that of external radiation. It is his opinion that in the near future radium will

be employed largely for interstitial applications, and short wave x-rays for treatment from the exterior. If the high voltage x-ray tube does nothing more than replace the expensive radium pack, it will have well served its purpose. Coincidentally, the price of radium may be reduced to a point at which it can be obtained at a more reasonable price and thus made available to institutions and radiologists who have heretofore been deprived of its use. Patients from the author's clinic who have been submitted to the Lauritsen tube have shown interesting reactions in some instances. Some with extensive secondary carcinoma of the glands of the neck, primary in the tongue, lip or tonsil, which had already been appreciably reduced with the 200 kilovolt tube and had become radiation fast, were perceptibly benefited, and in a few instances the use of the big tube caused entire disappearance of the growth. Similar reactions were observed in certain types of carcinoma of the fundus, metastatic carcinoma from the breast, and (in one patient) carcinoma of the rectum. Not in all were preliminary responses equally satisfactory, but enough has been observed to warrant the belief that time and experience will bring better results than are now obtained with the 200 kilovolt apparatus. According to Lauritsen, it is quite possible, both electrically and architecturally, to construct a transformer and tube of almost unlimited voltage. If time should demonstrate that its usefulness increases in proportion to its rise in voltage, a new field of endeavor will open for those men who have faith in radiology and who continue to labor earnestly to keep pace with each progressive step, and will mean much to an expectant public, which demands from these members and workers of the medical profession that they give to them and to the world of the afflicted the fruit of their labors.

Benign Form of Osteomyelitis of Spine

ALAN DEFOREST SMITH, New York (*Journal A. M. A.*, July 29, 1933), reviews the records of seventeen cases of osteomyelitis of the spine seen during a period of more than six years. He states that osteomyelitis of the vertebral bodies occurs quite frequently in a comparatively mild form which may easily be mistaken for tuberculosis. These lesions have a marked tendency to cause

spontaneous bony fusion of the vertebral bodies. They should be treated conservatively until it is certain that a cure will not result in this way. The author reports two typical cases.

Toxicity of Alpha-Dinitrophenol: Report of Case

In the clinical trial of alpha-dinitrophenol in fourteen cases of obesity, treated as recommended by Cutting, Mehrtens and Tainter, HAMILTON H. ANDERSON, ALFRED C. REED and GEORGE A. EMERSON, San Francisco (*Journal A. M. A.*, Sept. 30, 1933) encountered one severe toxic reaction which differed from case reports found in the literature. They termed this case a "qualitative idiosyncrasy," according to Storm van Leeuwen's classification. The patient received a total oral dose of 39.3 mg. of alpha-dinitrophenol per kilogram of body weight over a period of fourteen days. It is apparently not an instance of small therapeutic amounts of the drug producing symptoms described for the known toxic effects of large doses. The authors were not familiar with the warning of Perkins that persons with chronic rheumatism, alcoholism, tuberculosis and renal and hepatic disease have a lessened resistance to the agent. Their patient suffered from chronic hypertrophic arthritis before therapy, and after alpha-dinitrophenol had severe intermittent joint pains in areas previously not involved. There was no evidence of permanent organic damage so far as physical examination and laboratory tests could determine. The thirteen other patients given the drug in therapeutic amounts had no apparent untoward effects. The authors suggest that Derrien's test be used in determining the presence of the agent in the urine of patients under treatment as a means of detecting intolerance to the drug, although in this case of allergy the test was of no value. The toxicity in rats of the compound used in this group of patients corresponds to the reports of previous investigators, the average lethal dose being 40 mg. per kilogram. Toxicity work of this character is of no value in predicting the occurrence of allergic responses. It is especially to be noted that the toxic range of alpha-dinitrophenol is broad, indicating a high probability of untoward reactions at relatively low dosage. On this account, dosage in human beings must be strictly and conservatively controlled, and it should be based on average body

weight for age, sex and height of the patient. It is yet to be demonstrated that this drug is as safe and satisfactory for weight reduction in human beings as other methods in common use.

Cholecystitis: Study Based on Follow-Up After From Five to Fifteen Years of Two Hundred Patients Not Operated On

The study of J. M. BLACKFORD, ROBERT L. KING and K. K. SHERWOOD, Seattle (*Journal A. M. A.*, Sept. 16, 1933), confirms their impression, contrary to surgical literature, that cholecystitis may be frequently treated successfully along medical lines. The risk of developing a surgical emergency or calamity while under medical treatment is not great; in fact, it is less than the risk of the best elective gallbladder surgery. It should be recognized that the disease is chronic and has caused symptoms for an average of nearly ten years before the patient is seen in the examining room. Doubtless earlier advice would give far better results from medical treatment. The authors believe emphatically that, when medical management fails to relieve promptly, surgery should be urged, for the large majority of medical failures may be thus relieved and complications avoided. Complications such as obstructive jaundice, empyema or rupture of the gallbladder multiply the surgical risk by from five to ten times and may cause irreparable hepatic damage even if the patient survives operation. Necropsy statistics show that 60 per cent of all adults are cholecystopathic but that a malignant condition in the gallbladder develops in only about 2 per cent. Patients having carcinoma of the gallbladder are usually past the age of 60 and almost always have gallstones. Careful clinical study of the patient is still the best method of study. The roentgenograms and the clinical laboratory are indispensable adjuncts; they will frequently confirm and occasionally make the diagnosis. They cannot size up the case or advise the patient. This must be done after painstaking clinical study, with consideration of the patient from all angles, rather than entirely from the objective standpoint. Such clinical study will lessen the error, followed by poor results, of removing the gallbladder, even though it has stones, in attempting to cure mucous colitis, renal calculi or pyelitis, functional dyspepsia

associated with enteroptosis, nervous breakdowns with an irritable intestine, root pains of arthritis or tabes, migraine, constipation neuroses and the like.

DRAMATIC REVIEW

Men in White. By Sidney Kingsley: Group Theatre, producer. Current attraction at the Broadhurst Theatre, New York City.

"Men in White" is a play for doctors and laymen. Its tense, throbbing action throughout its nine hospital scenes promises to make it the greatest success of the Group Theatre. The story centers around Doctor Ferguson, the resident, his sweetheart Laura Hudson, daughter of a wealthy real estate speculator, and Doctor Hochberg, the noted surgeon.

After a trying day at the hospital, Ferguson is obliged to remain during the evening, instead of keeping what Laura considers an important engagement. She objects to numerous interferences with her social life and squarely gives him the choice of a smug, private practice, married to her, or years of study and privation in order to become the great surgeon Hochberg is bent on making him. Under the strain of unceasing hours and duties at the hospital, together with further difficulties with Laura, Ferguson gives some encouragement to a student nurse, who has just gone through the trying experience of her first serious case. Going to his room to borrow a book, she decides to remain. Where love runs a speedy course. As a result of that embrace, followed by the crude surgical procedure of a "butcher", she is wheeled, some three months later, into the operating room for an emergency complete hysterectomy. This is clearly indicated to Hochberg for septic abortion. (It is plain the author is no surgeon!) In a semi-conscious state, the nurse confesses her love for Ferguson, and exculpates him of all blame, while Laura looks on aghast. The doctors scrub thoroughly, donning gowns and rubber gloves. Laura touches Ferguson. He springs away—orders sterile gown and gloves—hurries to Hochberg's side. The next day the nurse dies; Ferguson and Laura decide to go away together and talk things over.

The audience is taken "behind the scenes" of the hospital into a bustling, depressing atmosphere, amplified by the intermittent calling of a mechanical speaker. At the library, one meets the retired physician, who is constantly reading

and worrying how the young physician can ever keep up with the literature; the conceited physician; the struggling physician; the lean, hungry interne; the light hearted interne. In the board room, the financial difficulties of the hospital are aired, and pressure is applied on professional matters by business interests.

The play is true to life throughout, excepting the scene in which Ferguson snatches the syringe of insulin from the attending physician and injects glucose instead. It pictures a physician as a man with all the emotions, virtues, and faults of other individuals, in addition to which is ground in the indefinable drive of the profession, a cause which Hochberg can best express as "humanity". The play is very good "hospital", and excellent "theatre".

BOOK REVIEWS

Senile Cataract: Methods of Operating. By W. A. Fisher. M. D., Professor of Ophthalmology. Chicago Eye, Ear, Nose and Throat College. Second Edition. Pp. 271, with 183 illustrations. Cloth. Price, \$. Chicago: Chicago Eye, Ear, Nose and Throat College, 1933.

This second edition contains 148 more pages than the first. It contains chapters by Ernst Fuchs, I. Barraquer, H. T. Holland, J. W. Wright, Arnold Knapp, W. A. Fisher, and A. Van Lint. The fitting of correcting lenses after cataract extractions, by O. B. Nugent, is the last chapter, dealing with a subject which is little considered in lecture or literature. The book gives a good summary of the different types of intracapsular extraction accompanied by thorough illustrations.

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